Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
EASTERN DISTRICT OF NEW YORK	_	
Case number (if known)	_ Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	Chapter 13	Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

04/20

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	Robert First name W Middle name MacDowell Last name and Suffix (Sr., Jr., II, III)	Maureen First name E Middle name MacDowell Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-8983	xxx-xx-5051

Debtor 2 Maureen E MacDowell Case number (if known) **About Debtor 1:** About Debtor 2 (Spouse Only in a Joint Case): Any business names and **Employer Identification** Numbers (EIN) you have I have not used any business name or EINs. I have not used any business name or EINs. used in the last 8 years Include trade names and Business name(s) Business name(s) doing business as names EIN EIN If Debtor 2 lives at a different address: Where you live 77 Orienta Avenue Lake Grove, NY 11755 Number, Street, City, State & ZIP Code Number, Street, City, State & ZIP Code Suffolk County County If your mailing address is different from the one If Debtor 2's mailing address is different from yours, fill it above, fill it in here. Note that the court will send any in here. Note that the court will send any notices to this notices to you at this mailing address. mailing address. Number, P.O. Box, Street, City, State & ZIP Code Number, P.O. Box, Street, City, State & ZIP Code Why you are choosing Check one: Check one: this district to file for bankruptcy Over the last 180 days before filing this petition, Over the last 180 days before filing this petition, I I have lived in this district longer than in any have lived in this district longer than in any other other district. district. I have another reason. I have another reason. Explain. (See 28 U.S.C. § 1408.) Explain. (See 28 U.S.C. § 1408.)

Robert W MacDowell

Debtor 1

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The chapter of the Bankruptcy Code you are choosing to file under to chapter 13 8. How you will pay the fee will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for me about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashler's check, order. If your atternery is submitting your payment on your behalf, your intorney may pay with a credit card or do a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals The Filing Fee in Installments (Official Form 103A). I request that my fee be waited (You may request this option, sign and attach the Application for Individuals The Filing Fee in Installments (Official Form 103A). I request that my fee be waited (You may request this option, sign and attach the Application for Individuals The Filing Fee in Installments (Official Form 103A). I request that my fee be waited (You may request this option, sign and attach the Application for Individuals The Filing Fee in Installments (Official Form 103A).	Debtor 1 Robert W MacDo Debtor 2 Maureen E MacDo				Case number (if known)	
Bankruptcy Code you are choosing to file under	Part 2: Tell the Court About	t Your Bankrup	tcy Case			
Chapter 11 Chapter 12 Chapter 13	Bankruptcy Code you are					,
Chapter 12	choosing to file under	☐ Chapter 7	•			
8. How you will pay the fee I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for mo about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, order. If your altorney is submitting your behalf, your attorney may pay with a credit card ord a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals The Filing Fee in Installments (Official Form 103A). I request that my fee be waitived (You may request this option only if you are filing for Chapter 7. By law, a jub but is not required to, waive your fee, and may do so only if your income is less than 150% of the official pover applies to your family size and you are unable to pay the fee in installments, If you choose this option only if you are filing for Chapter 7. By law, a jub bankruptcy within the last 8 years? No.		☐ Chapter 1	1			
8. How you will pay the fee I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for mo about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, order. If your attorney may pay with a credit card or of a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals The Filling Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a jubit is not required to, waive your fee, and may do so only if your income is less than 150% of the official pover applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with you choose this option, you must the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with you choose this option, you must the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. No. District		☐ Chapter 1	2			
about how you may pay, Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or di a pre-printed address. need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals The Filing Fee in Installments. If you choose this option only if you are filing for Chapter 7. By law, a jub but is not required to, waive your fee, and may do so only if your income is less than 150% of the official pover applies to your family size and you are unable to pay the fee in installments). If you choose this option, you mut the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. No.		Chapter 1	3			
The Filing Fee in Installments (Official Form 103A). request that my fee be waived (You may request his option only if you are filing for Chapter 7. By law, a jur but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poven applies to your family size and you are unable to pay the fee in installments). If you choose this option, you mu the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. 9. Have you filed for bankruptcy within the last 8 years? No.	8. How you will pay the fee	about h order. I a pre-p	now you may pay. Ty f your attorney is sub rinted address.	rpically, if you are paying the fee your payment on your behavior.	ourself, you may pay with cash, cashier's check, or modalf, your attorney may pay with a credit card or check v	ney with
District When Case number 10. Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? Debtor Relationship to you District When Case number, if known Debtor Relationship to you District When Case number, if known Debtor Case number, if known Debtor Relationship to you District When Case number, if known 11. Do you rent your residence? No. Go to line 12. Has your landlord obtained an eviction judgment against you? No. Go to line 12. Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it as		The Fill I reque but is n applies	ing Fee in Installmer est that my fee be we not required to, waive to your family size a	nts (Official Form 103A). raived (You may request this option your fee, and may do so only if you and you are unable to pay the fee in	n only if you are filing for Chapter 7. By law, a judge murincome is less than 150% of the official poverty line in installments). If you choose this option, you must fill o	ay, that
District	bankruptcy within the					
District	last 8 years?		Carolina Ca	Missa	One a second or	
District When Case number					Coop number	
cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? Debtor						
District When Case number, if known Relationship to you District When Case number, if known	cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an					
Debtor Relationship to you District When Case number, if known 11. Do you rent your residence? No. Go to line 12. Has your landlord obtained an eviction judgment against you? No. Go to line 12. Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it as		De	ebtor		Relationship to you	
District When Case number, if known 11. Do you rent your residence?		Di	istrict	When	Case number, if known	
11. Do you rent your residence? No. Go to line 12.		D	ebtor		Relationship to you	
residence? Has your landlord obtained an eviction judgment against you? No. Go to line 12. Yes. Fill out <i>Initial Statement About an Eviction Judgment Against You</i> (Form 101A) and file it as		Di	istrict	When	Case number, if known	
 ☐ Yes. Has your landlord obtained an eviction judgment against you? ☐ No. Go to line 12. ☐ Yes. Fill out <i>Initial Statement About an Eviction Judgment Against You</i> (Form 101A) and file it as 		■ No. (Go to line 12.			
Yes. Fill out <i>Initial Statement About an Eviction Judgment Against You</i> (Form 101A) and file it as	residence?	□ Yes. I	las your landlord ob	tained an eviction judgment agains	t you?	
		ı	☐ No. Go to line	e 12.		
· · ·		I			Judgment Against You (Form 101A) and file it as part of	of

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	otor 1 Robert W MacDov otor 2 Maureen E MacDo				Case number (if known)
Par	Report About Any Bu	ısinesses	You Owr	as a Sole Propriet	or
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.	
		☐ Yes.	Name	and location of busi	iness
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.			e of business, if any	
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	er, Street, City, Stat	e & ZIP Code
	it to this petition.		Chec	k the appropriate box	x to describe your business:
				Health Care Busin	ess (as defined in 11 U.S.C. § 101(27A))
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))
				Stockbroker (as de	efined in 11 U.S.C. § 101(53A))
				Commodity Broke	r (as defined in 11 U.S.C. § 101(6))
				None of the above	
13.	Are you filing under Chapter 11 of the Bankruptcy Code, and are you a small business debtor or a debtor as defined by 11 U.S.C. § 1182(1)?	proceed you are	under Sulchoosing to w stateme)(B).	bchapter V so that it to proceed under Sul nt, and federal incon	court must know whether you are a small business debtor or a debtor choosing to can set appropriate deadlines. If you indicate that you are a small business debtor or bchapter V, you must attach your most recent balance sheet, statement of operations, ne tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C.
	For a definition of small	■ No.	I am ı	not filing under Chap	ter 11.
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am f Code		11, but I am NOT a small business debtor according to the definition in the Bankruptcy
		☐ Yes.			11, I am a small business debtor according to the definition in the Bankruptcy Code, and d under Subchapter V of Chapter 11.
		☐ Yes.	I am f	iling under Chapter as se to proceed under	11, I am a debtor according to the definition in § 1182(1) of the Bankruptcy Code, and I Subchapter V of Chapter 11.
Par	t 4: Report if You Own or	· Have Any	y Hazardo	ous Property or Any	y Property That Needs Immediate Attention
14.	Do you own or have any	■ No.			
	property that poses or is alleged to pose a threat of imminent and identifiable hazard to	■ No. □ Yes.	What is	the hazard?	
	public health or safety?				
	Or do you own any property that needs immediate attention?			liate attention is why is it needed?	
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	s the property?	
					Number, Street, City, State & Zip Code

	Maureen E MacDo	 eceive a Briefing About Credit Counseling		Case number (if known)
ar	Explain Your Efforts t	out Debtor 1:	Δhr	out Debtor 2 (Spouse Only in a Joint Case):
15.	Tell the court whether you have received a briefing about credit counseling. The law requires that you	I must check one: I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.		u must check one: I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.
	receive a briefing about credit counseling before you file for bankruptcy.	Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.		Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.
	You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.	I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.		I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.
	If you file anyway, the court can dismiss your case, you	Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.		Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.
	will lose whatever filing fee you paid, and your creditors can begin collection activities again.	I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.		I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.
		To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances		To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case. Your case may be dismissed if the court is dissatisfied
		required you to file this case. Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a		with your reasons for not receiving a briefing before you filed for bankruptcy.
		briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case		If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.
		may be dismissed. Any extension of the 30-day deadline is granted		Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.
		only for cause and is limited to a maximum of 15 days. I am not required to receive a briefing about credit counseling because of:		I am not required to receive a briefing about credit counseling because of:
		☐ Incapacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.		☐ Incapacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.
		Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.		□ Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.
		Active duty. I am currently on active military duty in a		Active duty. I am currently on active military duty in a military

military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a

motion for waiver credit counseling with the court.

combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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	otor 1 otor 2	Robert W MacDow Maureen E MacDo				Case nu	mber (if known)	
Par	t 6:	Answer These Questi	ions for Rep	orting Purposes				
	What	kind of debts do	16a. <i>I</i>	Are your debts primarily consurndividual primarily for a personal,	mer debts? Consum	er debts are	defined in 11 U.S.C. §	101(8) as "incurred by an
	you.			☐ No. Go to line 16b.	ranny, or nedection	parpooo.		
				Yes. Go to line 17.				
				Are your debts primarily busine				
			_	noney for a business or investmen	nt or through the ope	eration of the	business or investmen	t.
			_	☑ No. Go to line 16c. ☑ Yes. Go to line 17.				
				State the type of debts you owe th	at are not consumer	debts or bus	siness debts	
			_					
17.		ou filing under oter 7?	■ No.	am not filing under Chapter 7. Go	o to line 18.			
	after	ou estimate that any exempt erty is excluded and	☐ Yes. I	am filing under Chapter 7. Do you are paid that funds will be available	u estimate that after a e to distribute to unse	any exempt p ecured credit	property is excluded an tors?	d administrative expenses
	admi	nistrative expenses aid that funds will	[□No				
	be a	ailable for	[☐Yes				
		ibution to unsecured tors?						
18.		many Creditors do	1 -49		1 ,000-5,000		2 5,001-50	
	owe?	estimate that you	□ 50-99		☐ 5001-10,000 ☐ 10,001-25,000		☐ 50,001-10 ☐ More than	
			☐ 100-199 ☐ 200-999		— 10,001 20,000		- Wore than	1100,000
19.		much do you	□ \$0 - \$50	0,000	□ \$1,000,001 - \$1	0 million	□ \$500,000,	,001 - \$1 billion
		nate your assets to orth?		- \$100,000	□ \$10,000,001 - \$			00,001 - \$10 billion 000,001 - \$50 billion
				01 - \$500,000 01 - \$1 million	□ \$50,000,001 - \$ □ \$100,000,001 -			
20.	How	much do you	□ \$0 - \$50		□ \$1,000,001 - \$1	0 million	☐ \$500,000	,001 - \$1 billion
		nate your liabilities		1 - \$100,000	□ \$10,000,001 - \$1			00,001 - \$10 billion
	to be	•		1 - \$500,000	□ \$50,000,001 - \$		_ ' ' '	000,001 - \$50 billion
			\$500,00	01 - \$1 million	\$100,000,001 -	\$500 million	☐ More that	n \$50 billion
Par	t 7:	Sign Below						
For	you		I have exar	mined this petition, and I declare u	under penalty of perju	ury that the ir	nformation provided is t	rue and correct.
				osen to file under Chapter 7, I am ses Code. I understand the relief a				
				ey represents me and I did not pa I have obtained and read the noti				p me fill out this
			I request re	elief in accordance with the chapte	er of title 11, United S	States Code,	specified in this petition	າ.
				nd making a false statement, conc case can result in fines up to \$25				
			/s/ Rober	t W MacDowell			E MacDowell	
			Signature of	MacDowell of Debtor 1		aureen E N gnature of De		
			Executed o	on September 16, 2020	Ex	recuted on	September 16, 202	0
				MM / DD / YYYY		-	MM / DD / YYYY	

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Debtor 1 Debtor 2 Maureen E MacDe		Cas	e number (if known)
For your attorney, if you are represented by one	under Chapter 7, 11, 12, or 13 of title 11, Uni	ted States Code, and have e	informed the debtor(s) about eligibility to proceed explained the relief available under each chapter debtor(s) the notice required by 11 U.S.C. § 342(b)
If you are not represented by		s, certify that I have no know	ledge after an inquiry that the information in the
an attorney, you do not need to file this page.	schedules filed with the petition is incorrect.		
to me mis page.	/s/ Ronald D. Weiss	Date	September 16, 2020
	Signature of Attorney for Debtor		MM / DD / YYYY
	g		
	Ronald D. Weiss 4419		
	Printed name		
	Ronald D. Weiss, P.C.		
	Firm name		
	734 Walt Whitman Road		
	Suite 203		
	Melville, NY 11747		
	Number, Street, City, State & ZIP Code		
	Contact phone (631) 271-3737	Email address	weiss@ny-bankruptcy.com
	4419 NY		
	Bar number & State		

Fill	in this information to identify your case:		
Deb	otor 1 Robert W MacDowell		
Deb	First Name Middle Name Last Name otor 2 Maureen E MacDowell		
(Spo	use if, filing) First Name Middle Name Last Name		
Uni	ted States Bankruptcy Court for the: EASTERN DISTRICT OF NEW YORK		
	se number	_	ck if this is an ended filing
	ficial Form 106Sum		
	mmary of Your Assets and Liabilities and Certain Statistical Information		12/15
info	es complete and accurate as possible. If two married people are filing together, both are equally responsible f rmation. Fill out all of your schedules first; then complete the information on this form. If you are filing ameno r original forms, you must fill out a new <i>Summary</i> and check the box at the top of this page.		
Par	t 1: Summarize Your Assets		
			assets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	446,620.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	49,651.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	496,271.00
Par	t 2: Summarize Your Liabilities		
		Your	liabilities
			int you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	438,937.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	143,376.00
	Your total liabilities	\$	582,313.00
Par	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	7,308.06
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	7,230.00
Par	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	our other s	chedules.
7.	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.	a persona	al, family, or
	Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this the court with your other schedules.	s box and	submit this form to

Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

Debto	Maureen E MacDowell	Case number (if known)		
	rom the Statement of Your Current Monthly Income: Co 22A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1		\$12,22	7.82

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

Debtor 1 Robert W MacDowell

	Total clair	n
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	307.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	307.00

Deh	in this information	n to identify your case	e and this filing:		
	tor 1 Re	obert W MacDowell	1		
	Fire	st Name	Middle Name Last Name		
		aureen E MacDowe st Name	Middle Name Last Name		
	3,				
Unit	ed States Bankrup	tcy Court for the: EAS	STERN DISTRICT OF NEW YORK		
Cas	e number				☐ Check if this is an amended filing
					•
⊃fi	icial Form	106A/B			
			4.7		
		VB: Proper	ns. List an asset only once. If an asset fits in more than on		12/15
	No. Go to Part 2. Yes. Where is the p		erest in any residence, building, land, or similar property?		
1.1	77 Orienta Ave	onue	What is the property? Check all that apply		
1.1	77 Orienta Avenue	Single-family home	the amount of any secur	claims or exemptions. Put red claims on <i>Schedule D:</i>	
1.1		enue ible, or other description		the amount of any secur	
1.1			Single-family home Duplex or multi-unit building Condominium or cooperative	the amount of any secur Creditors Who Have Cla	red claims on Schedule D: nims Secured by Property.
1.1			Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home	the amount of any secur	red claims on Schedule D:
1.1	Street address, if availa	ble, or other description	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property	the amount of any secur Creditors Who Have Cla	red claims on Schedule D: aims Secured by Property. Current value of the
1.1	Street address, if available Lake Grove	ble, or other description NY 11755-0	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land ode Investment property Timeshare	the amount of any secur Creditors Who Have Classifications Current value of the entire property? \$446,620.00 Describe the nature of	ced claims on Schedule D: aims Secured by Property. Current value of the portion you own? \$446,620.00 your ownership interest
1.1	Street address, if available Lake Grove	ble, or other description NY 11755-0	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land ode Investment property Timeshare Other	the amount of any secur Creditors Who Have Classifications Current value of the entire property? \$446,620.00 Describe the nature of	ced claims on Schedule D: nims Secured by Property. Current value of the portion you own? \$446,620.00 your ownership interest nancy by the entireties, or
1.1	Street address, if available Lake Grove	ble, or other description NY 11755-0	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land ode Investment property Timeshare	the amount of any secur Creditors Who Have Classifications which have classifications who have classifications which have classification	ced claims on Schedule D: nims Secured by Property. Current value of the portion you own? \$446,620.00 your ownership interest nancy by the entireties, or
1.1	Street address, if available Lake Grove	ble, or other description NY 11755-0	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one	the amount of any secur Creditors Who Have Classifications which have classifications who have classifications which have classifications	ced claims on Schedule D: aims Secured by Property. Current value of the portion you own? \$446,620.00 your ownership interest nancy by the entireties, or
1.1	Street address, if available Lake Grove City	ble, or other description NY 11755-0	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one Debtor 1 only	the amount of any secur Creditors Who Have Classifications who Have Classification Current value of the entire property? \$446,620.00 Describe the nature of (such as fee simple, te a life estate), if known. Sole Owner	ced claims on Schedule D: aims Secured by Property. Current value of the portion you own? \$446,620.00 your ownership interest nancy by the entireties, or
1.1	Street address, if available Lake Grove City Suffolk	ble, or other description NY 11755-0	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	the amount of any secur Creditors Who Have Classifications. Current value of the entire property? \$446,620.00 Describe the nature of (such as fee simple, te a life estate), if known. Sole Owner Check if this is co (see instructions)	ced claims on Schedule D: aims Secured by Property. Current value of the portion you own? \$446,620.00 your ownership interest nancy by the entireties, or
1.1	Street address, if available Lake Grove City Suffolk	ble, or other description NY 11755-0	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	the amount of any secur Creditors Who Have Classifications. Current value of the entire property? \$446,620.00 Describe the nature of (such as fee simple, te a life estate), if known. Sole Owner Check if this is co (see instructions)	ced claims on Schedule D: aims Secured by Property. Current value of the portion you own? \$446,620.00 your ownership interest nancy by the entireties, or
1.1	Street address, if available Lake Grove City Suffolk	ble, or other description NY 11755-0	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one Debtor 1 only Debtor 2 only At least one of the debtors and another Other information you wish to add about this ite	the amount of any secur Creditors Who Have Classifications. Current value of the entire property? \$446,620.00 Describe the nature of (such as fee simple, te a life estate), if known. Sole Owner Check if this is co (see instructions)	ced claims on Schedule D: aims Secured by Property. Current value of the portion you own? \$446,620.00 your ownership interest nancy by the entireties, or

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

Debtor 2				Case number (if known)	
Cars,	, vans, trucks, trac	tors, sport utility vel	nicles, motorcycles		
□ No					
■ Yes	es				
	Make: Honda Model: Pilot		Who has an interest in the property? Check one ☐ Debtor 1 only	the amount of any	ured claims or exemptions. Put secured claims on Schedule D: ve Claims Secured by Property.
А	Year: 2019 Approximate mileage: Other information:	35000	■ Debtor 2 only □ Debtor 1 and Debtor 2 only	Current value of t entire property?	the Current value of the portion you own?
	onei momaton.		☐ At least one of the debtors and another ☐ Check if this is community property (see instructions)	\$22,070	9.00 \$22,070.00
	Make: Toyota Model: Camry		Who has an interest in the property? Check one Debtor 1 only	the amount of any	ured claims or exemptions. Put secured claims on Schedule D: ve Claims Secured by Property.
Α	Year: 2007 Approximate mileage: Other information:	170000	□ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another	Current value of t entire property?	the Current value of the portion you own?
			☐ Check if this is community property (see instructions)	\$1,646	\$1,646.00
	ples: Boats, trailers,		d other recreational vehicles, other vehicles, tercraft, fishing vessels, snowmobiles, motorcycl		
■ No	ples: Boats, trailers, o ss	, motors, personal wat		le accessories	\$22.740.00
Examp No Yes	ples: Boats, trailers, s the dollar value of	, motors, personal wat	tercraft, fishing vessels, snowmobiles, motorcycl	le accessories	\$23,716.00
Examp No Per Add page	ples: Boats, trailers, bs the dollar value of es you have attach Describe Your Perso	, motors, personal wat f the portion you ow led for Part 2. Write to onal and Household Ite	tercraft, fishing vessels, snowmobiles, motorcycles n for all of your entries from Part 2, including hat number here	le accessories	
Examp No Per Add page	ples: Boats, trailers, bs the dollar value of es you have attach Describe Your Perso	, motors, personal wat f the portion you ow led for Part 2. Write to onal and Household Ite	tercraft, fishing vessels, snowmobiles, motorcycles n for all of your entries from Part 2, including hat number here	le accessories	\$23,716.00 Current value of the portion you own? Do not deduct secured claims or exemptions.
Examp ■ No □ Yes 5 Add .page Part 3: □ Do you Hous Exam □ No	the dollar value of es you have attach Describe Your Person own or have any in the dollar value of es you have attach own or have any in the dollar own or have and in the dollar own or have and in the dollar own or have and in the dollar own or have any in the dollar own or	, motors, personal wat f the portion you own ed for Part 2. Write t onal and Household Ite legal or equitable int	n for all of your entries from Part 2, including hat number here	le accessories	Current value of the portion you own? Do not deduct secured
Examp ■ No □ Yes 5 Add .page Part 3: □ Do you Hous Exam □ No	the dollar value of es you have attach Describe Your Person own or have any leading to the serious and the se	f the portion you owned for Part 2. Write to the portion and Household Itelegal or equitable interpretable interpr	n for all of your entries from Part 2, including hat number here	le accessories	Current value of the portion you own? Do not deduct secured
Examp ■ No □ Yes 5 Add .page Part 3: □ Do you Hous Exam □ No	the dollar value of es you have attach Describe Your Person own or have any in the dollar value of es you have attach own or have any in the dollar own or have and in the dollar own or have and in the dollar own or have and in the dollar own or have any in the dollar own or	f the portion you owned for Part 2. Write to the portion and Household Itelegal or equitable interpretable interpr	n for all of your entries from Part 2, including hat number here	le accessories	Current value of the portion you own? Do not deduct secured claims or exemptions.
No ☐ Yes Add page Part 3: ☐ No you Hous Exam ☐ No ☐ Yes	the dollar value of es you have attach Describe Your Person own or have any long to the dollar value of es you have attach Describe Your Person own or have any long to the dollar on	f the portion you owned for Part 2. Write to the portion and Household Itelegal or equitable interestings and furniture, linens, furniture	n for all of your entries from Part 2, including hat number hereems erest in any of the following items? china, kitchenware	g any entries for	Current value of the portion you own? Do not deduct secured claims or exemptions.
Examp No Yes Add page Part 3: Do you Hous Exam No Yes	the dollar value of es you have attach Describe Your Person own or have any long to the dollar value of es you have attach Describe Your Person own or have any long to the dollar on	f the portion you owned for Part 2. Write to the portion and Household Itelegal or equitable interestings furnishings inces, furniture, linens, furniture	n for all of your entries from Part 2, including hat number hereems erest in any of the following items? china, kitchenware	g any entries for	Current value of the portion you own? Do not deduct secured claims or exemptions.
Examp No Yes Add page Part 3: Do you Hous Exam No Yes	the dollar value of es you have attach Describe Your Person own or have any losehold goods and imples: Major appliar oes. Describe	f the portion you owned for Part 2. Write to the portion and Household Itelegal or equitable interestings furnishings inces, furniture, linens, furniture	n for all of your entries from Part 2, including hat number hereems erest in any of the following items? china, kitchenware	g any entries for	Current value of the portion you own? Do not deduct secured claims or exemptions.

8. Collectibles of value

Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles

■ No

Official Form 106A/B Schedule A/B: Property page 2

Debtor Debtor		Robert W Maureen E M			Case number (if known)	
ΠY	es.	Describe				
Exa □ N	imple No	ent for sports a es: Sports, photo musical instr Describe	ographic, exercise, and oth	ner hobby equipment; bicycles, pool tables	s, golf clubs, skis; canoes an	d kayaks; carpentry tools;
			treadmill			\$1,500.00
■ N □ Y 11. Clo	amp lo 'es. othes amp	oles: Pistols, rifle Describe	s, shotguns, ammunition,	and related equipment designer wear, shoes, accessories		
■ Y	es.	Describe	clothing			\$2,500.00
		Describe	jewelry engagement ring,			\$7,500.00
		rm animals bles: Dogs, cats,				
□ N ■ Y		Describe				
			family pets 3 dogs, 2 cats			\$0.00
■ N	10	her personal an	-	did not already list, including any healt	h aids you did not list	
				m Part 3, including any entries for page	es you have attached	\$16,000.00
Part 4:		scribe Your Finan				
Do you	u ow	n or have any l	legal or equitable interes	it in any of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
□N	amp √o		have in your wallet, in you	r home, in a safe deposit box, and on han	d when you file your petition	
					Cash	\$20.00

Official Form 106A/B
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btor 1 btor 2	Robert W Ma Maureen E N			Case number (if known)	
				ounts; certificates of deposit; shares in credit unions, brokerage houses, and s with the same institution, list each.	other similar
				Institution name:	
. 55		17.1.	Checking	Teachers Federaal Credit Union Acct #	\$900.00
		17.2.	Savings	Teachers Federaal Credit Union Acct #	\$0.00
		17.3.	Savings	Teachers Federaal Credit Union Acct #	\$9,000.00
		17.4.	Savings	Bethpage Federal Credit Union Acct #	\$10.00
		17.5.	Savings	Bethpage Federal Credit Union Acct #	\$5.00
Govern Negotia	nment and corpo	Nar orate bor include p	ersonal checks, ca	% of ownership: otiable and non-negotiable instruments shiers' checks, promissory notes, and money orders. ansfer to someone by signing or delivering them.	
■ No	Give specific info	ormation a	•		
Examp □ No -	nent or pension bles: Interests in I	IRA, ERIS	SA, Keogh, 401(k),	403(b), thrift savings accounts, or other pension or profit-sharing plans	
— 100.1	List edon decoun		of account:	Institution name:	
		401(k	x)	Retirement account	\$0.00
Your sl		d deposit	s you have made s	o that you may continue service or use from a company public utilities (electric, gas, water), telecommunications companies, or othe	rs
				Institution name or individual:	
Annuiti ■ No □ Yes	,	·	dic payment of mon	ey to you, either for life or for a number of years)	
			•	qualified ABLE program, or under a gualified state tuition program.	

Official Form 106A/B Schedule A/B: Property page 4

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

	ebtor 1 ebtor 2		V MacDowell E MacDowell		Case number	(if known)	
	■ No		Institution name and de	scription. Separately file the	records of any interests.11 U.S.C.	. § 521(c):	
25.	Trusts,	, equitable o	or future interests in pro	perty (other than anything I	isted in line 1), and rights or po	wers exercisab	le for your benefit
	■ No □ Yes.	Give specif	ic information about them.				
	Examp			rets, and other intellectual, proceeds from royalties and			
	■ No □ Yes.	Give specif	ic information about them.				
			ses, and other general in g permits, exclusive licenso		oldings, liquor licenses, professio	nal licenses	
	Yes.	Give specif	ic information about them.				
			NYS Teac	hing license			\$0.00
M	oney or p	property ov	ved to you?			p o D	urrent value of the ortion you own? o not deduct secured aims or exemptions.
28.	Tax ref	funds owed	to you				
	■ No □ Yes.	Give specifi	c information about them,	including whether you alread	y filed the returns and the tax yea	rs	
	Examp ■ No		ie or lump sum alimony, sp c information	pousal support, child support,	maintenance, divorce settlement	., property settlen	nent
30.		oles: Unpaid	meone owes you wages, disability insuranc s; unpaid loans you made		s, sick pay, vacation pay, worker	rs' compensation	Social Security
	■ No □ Yes.	Give specif	ic information				
			nce policies disability, or life insurance	e; health savings account (HS	A); credit, homeowner's, or rente	r's insurance	
	Yes.	Name the in	surance company of each Company name		Beneficiary:		Surrender or refund value:
			Metlife term life polic	су			\$0.00
32.	If you a		ficiary of a living trust, exp	om someone who has died ect proceeds from a life insu	rance policy, or are currently entit	led to receive pro	perty because
	■ No □ Yes.	Give specif	ic information				
33.				ot you have filed a lawsuit of insurance claims, or rights to	r made a demand for payment sue		
	_	Describe ea	ach claim				
∩ff	icial Earn	m 1064/R		Schedule A/R: Pro	nerty.		nage 5

Official Form 106A/B Schedule A/B: Property

Debt Debt		Robert W MacDowell Maureen E MacDowell		Case number (if known)	
	Other c	ontingent and unliquidated claims of every nature, inclu	ding counterclaims	of the debtor and rights to se	et off claims
	l Yes.	Describe each claim			
35. A	any fin	ancial assets you did not already list			
	No				
L	I Yes.	Give specific information			
36.		ne dollar value of all of your entries from Part 4, includin rt 4. Write that number here			\$9,935.00
Part	5: Des	cribe Any Business-Related Property You Own or Have an Inter	est In. List any real esta	ate in Part 1.	
37. D	o you o	wn or have any legal or equitable interest in any business-relate	ed property?		
	No. Go	to Part 6.			
	Yes. G	o to line 38.			
Part		scribe Any Farm- and Commercial Fishing-Related Property You ou own or have an interest in farmland, list it in Part 1.	Own or Have an Intere	st In.	
46. C	o you	own or have any legal or equitable interest in any farm-	or commercial fishir	ng-related property?	
	No.	Go to Part 7.			
	☐ Yes.	Go to line 47.			
Part	7:	Describe All Property You Own or Have an Interest in That You	ı Did Not List Above		
	Examp	have other property of any kind you did not already list' les: Season tickets, country club membership	?		
	No Yes. (Give specific information			
54.	Add tl	ne dollar value of all of your entries from Part 7. Write th	at number here		\$0.00
Part	8:	List the Totals of Each Part of this Form			
55.	Part 1	: Total real estate, line 2			\$446,620.00
56.	Part 2	: Total vehicles, line 5	\$23,716.00		<u> </u>
57.	Part 3	: Total personal and household items, line 15	\$16,000.00		
58.	Part 4	: Total financial assets, line 36	\$9,935.00		
59.		: Total business-related property, line 45	\$0.00		
60.		: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7	: Total other property not listed, line 54 +	\$0.00		
62.	Total	personal property. Add lines 56 through 61	\$49,651.00	Copy personal property total	\$49,651.00
63.	Total	of all property on Schedule A/B. Add line 55 + line 62		-	\$496,271.00

Official Form 106A/B Schedule A/B: Property page 6

						_
刮	ll in this inform	ation to identify your c	ase:			
De	ebtor 1	Robert W MacDow				
De	ebtor 2	First Name Maureen E MacDo	Middle Name	L	ast Name	
1	ouse if, filing)	First Name	Middle Name	L	ast Name	
Ur	nited States Bar	kruptcy Court for the:	EASTERN DISTRICT OF N	IEW Y	ORK	
Ca	ase number					
	known)					☐ Check if this is an amended filing
0	fficial For	m 106C				
S	chedule	e C: The Pro	perty You Cla	<u>aim</u>	as Exempt	4/19
the nee	property you lis	sted on <i>Schedule A/B: Pr</i> I attach to this page as m	operty (Official Form 106A/B	s) as yo	our source, list the property that you	or supplying correct information. Using claim as exempt. If more space is additional pages, write your name and
spe any fun exe	ecific dollar am y applicable sta ids—may be un emption to a pa	nount as exempt. Altern atutory limit. Some exe nlimited in dollar amou	atively, you may claim the mptions—such as those font. However, if you claim a	full fai or healt n exen	ir market value of the property be th aids, rights to receive certain b nption of 100% of fair market valu	One way of doing so is to state a sing exempted up to the amount of penefits, and tax-exempt retirement the under a law that limits the the your exemption would be limited
Pa	art 1: Identify	y the Property You Clai	m as Exempt			
1.	Which set of	exemptions are you cla	aiming? Check one only, eve	en if vo	our spouse is filing with you.	
	_		nonbankruptcy exemptions.		, ,	
	_	· ·	s. 11 U.S.C. § 522(b)(2)		3 ==(2)(3)	
2				omnt	fill in the information below	
۷.			-		fill in the information below.	0
		on of the property and line hat lists this property	on Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
			Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
	77 Orienta A 11755 Suffo	Avenue Lake Grove,	NY \$446,620.00		\$53,718.00	NYCPLR § 5206
		edule A/B: 1.1			100% of fair market value, up to any applicable statutory limit	
		Pilot 35000 miles	\$22,070.00		\$0.00	Debtor & Creditor Law §
	Line from Scri	edule A/B: 3.1			100% of fair market value, up to any applicable statutory limit	282(1)
		a Camry 170000 mile edule A/B: 3.2	s \$1,646.00		\$1,646.00	Debtor & Creditor Law §
	Line nom Sch	euule A/D. 3.2			100% of fair market value, up to any applicable statutory limit	282(1)
	furniture	adula A/D 6 4	\$3,000.00		\$3,000.00	NYCPLR § 5205(a)(5)
	Line from Sch	edule A/B: 6.1			100% of fair market value, up to any applicable statutory limit	

Official Form 106C

electronics

Line from Schedule A/B: 7.1

\$1,500.00

NYCPLR § 5205(a)(5)

\$1,500.00

100% of fair market value, up to any applicable statutory limit

Debtor Debtor				Case number (if known)		
	ief description of the property and line on hedule A/B that lists this property	Current value of the portion you own	and a comment of the		Specific laws that allow exemption	
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.		
	eadmill ne from <i>Schedule A/B</i> : 9.1	\$1,500.00		\$1,500.00	Debtor & Creditor Law § 283(1)	
				100% of fair market value, up to any applicable statutory limit	(.)	
	othing	\$2,500.00		\$2,500.00	NYCPLR § 5205(a)(5)	
L	ie nom denedale APB. TTT			100% of fair market value, up to any applicable statutory limit		
•	welry ngagement ring,	\$7,500.00		\$1,150.00	NYCPLR § 5205(a)(6)	
	ne from <i>Schedule A/B</i> : 12.1			100% of fair market value, up to any applicable statutory limit		
	mily pets dogs, 2 cats	\$0.00		\$0.00	NYCPLR § 5205(a)(4)	
	ne from Schedule A/B: 13.1			100% of fair market value, up to any applicable statutory limit		
	01(k): Retirement account	\$0.00		\$0.00	Debtor & Creditor Law § 282(2)(e)	
LII	ie IIIIII <i>Schedule PAB</i> . 21.1			100% of fair market value, up to any applicable statutory limit	202(2)(6)	
	etlife rm life policy	\$0.00		\$0.00	NY Ins. Law § 3212, Est. Pow. & Tr. § 7-1.5, NYCPLR §	
	ne from Schedule A/B: 31.1			100% of fair market value, up to any applicable statutory limit	5205(i)	
	re you claiming a homestead exemption ubject to adjustment on 4/01/22 and every			led on or after the date of adjustmer	nt.)	
	No					
		red by the exemption w	ithin 1	,215 days before you filed this case	?	
	□ No					
	☐ Yes					

Debtor 1 Robert W MacDowell Fire Name Macdo Name Last Name	Fill in this information to identify yo	our case:			
Debtor 2 Maureen E MacDowell					
United States Bankruptcy Court for the: EASTERN DISTRICT OF NEW YORK Case number ("Grown) Check if this is an amended filling Official Form 106D Schedule D: Creditors Who Have Claims Secured by Property 12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space-number ("I forward) I for supplying correct information. If more space-number ("I forward) I for supplying correct information. If more space-number ("I forward) I for supplying correct information. If more space-number ("I forward) I for supplying correct information. If more space-number ("I forward) I forward					
United States Bankruptcy Court for the: EASTERN DISTRICT OF NEW YORK Case number (# rown) Official Form 106D Schedule D: Creditors Who Have Claims Secured by Property 12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, if it out, number the entiries, and statch it to this form. On the top of any additional pages, write your name and case number (it known). Do any creditors have claims ascured by your property? No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. PYERTIFICATION TO any orderior and submit this form to the court with your other schedules. You have nothing else to report on this form. PRINTING List All Secured Claims. If a creditor has more than one sound claim, list the creditor sparately to report on this form. PRINTING List All Secured Claims. If a creditor has none than one sound claim, list the creditor is name. 2 List all secured claims. If a creditor has none than one sound claim, list the creditor is name. 2 List all secured claims. If a creditor has none than one sound claim, list the creditor is name. 2 List all secured claims. If a creditor has none than one sound claim, list the creditor is name. 2 Bethapage FCU Describe the property that secures the claim: 2 Bethapage FCU Describe the property that secures the claim: 2 Community debt Provided the confidence of the claim is: Cleok all that apply. 1 List All digits of account number PRINTING As of the date your file, the claim is: Cleok all that apply. 2 Citizens Auto Finance Cited the state of the debtors and another conduction in the provided that the creditor is not to the claim secured conduction in the claim is: Cleok all that apply. 2 List All digits of account number PRINTING 2 Citizens Auto Finance Cited the state of the debtors and another conduction in the claim is: Cleok all that				-	
Case number Check if this is an amended filing	(Spouse II, IIIIIIg) Flist Name	Middle Name Last Name			
Official Form 106D Schedule D: Creditors Who Have Claims Secured by Property 12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space in enceder, only the Additional Page, Ill's out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known). In or any creditors have claims secured by your property? No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. If yes, Fill in all of the information below. Parts II List All Secured Claims 2 List all secured claims. If a relation has more than one secured dain, list the creditor separately for each claims. If a relation has a possible in the during in submitted to the according in the creditor's rains. 2 List all secured Claims. If none than one creditor has a particular claim, list the other creditors in Part 2. As Amount of claim and the other creditors in Part 2. As Amount of claim and the other creditors in Part 2. As Amount of claim and the other creditors in Part 2. As Amount of claim and the other creditors in Part 2. As Amount of claim and the other creditors in Part 2. As a claim and the other creditors in Part 2. As Amount of claim and the other creditors in Part 2. As a claim and the other creditors in Part 2. As a claim and the other creditors in Part 2. As a claim and the other creditors in Part 2. As a claim and the other creditors in Part 2. As a claim and the other creditors in Part 2. As a claim and the other creditors in Part 2. As a claim and the other creditors in Part 2. As a claim and the other creditors in Part 2. As a claim and the other creditors in Part 2. As a claim and the other creditors in Part 2. As a claim and the other creditors in Part 2. As a claim and the other creditors in Part 2. As a claim and the other creditors in Part 2. As a claim and the other creditors in Part 2. As a claim	United States Bankruptcy Court for the	EASTERN DISTRICT OF NEW YORK		-	
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Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset) Auto Loan					
Who owes the debt? Check one. □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim relates to a community debt ■ Nature of lien. Check all that apply. ■ An agreement you made (such as mortgage or secured car loan) □ Statutory lien (such as tax lien, mechanic's lien) □ Judgment lien from a lawsuit ■ Other (including a right to offset) ■ Auto Loan	Number, Street, City, State & Zip Code				
□ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim relates to a community debt □ At least one of the debtors and another □ Check if this claim relates to a community debt □ Other (including a right to offset) □ Auto Loan	Who owes the debt? Check one.	•			
□ Debtor 2 only	Debtor 1 only	_	cured		
□ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim relates to a community debt □ Statutory lien (such as tax lien, mechanic's lien) □ Judgment lien from a lawsuit □ Other (including a right to offset) ■ Other (including a right to offset)	_		ouicu		
☐ At least one of the debtors and another ☐ Check if this claim relates to a community debt ☐ Other (including a right to offset) ☐ Auto Loan ☐ Auto Loan	_	☐ Statutory lien (such as tax lien, mechanic's lien)			
community debt					
Date debt was incurred 3/2019 Last 4 digits of account number 2983		Other (including a right to offset) Auto Loan			
	Date debt was incurred 3/2019	Last 4 digits of account number 2983			

Official Form 106D

Debtor 1	Robert W M	acDowell		Case number (if known)	
	First Name	Middle Name	Last Name		
Debtor 2	Maureen E I	MacDowell			
	First Name	Middle Name	Last Name		
Add the	dollar value of y	our entries in Column A on t	this page. Write that number here:	\$438,937.00	
	the last page of at number here:	your form, add the dollar va	lue totals from all pages.	\$438,937.00	

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Official Form 106D

Additional Page of Schedule D: Creditors Who Have Claims Secured by Property

Fill in this infor	mation to identify your	case:			
Debtor 1	Robert W MacDov	vell			
	First Name	Middle Name	Last Name		
Debtor 2	Maureen E MacDo				
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT C	OF NEW YORK		
Case number (if known)					☐ Check if this is an amended filing
	E/F: Creditors W			Port 2 for one ditors with NON	12/15
any executory con Schedule G: Exec Schedule D: Credi	ntracts or unexpired leases utory Contracts and Unexpi itors Who Have Claims Sec ntinuation Page to this pag	that could result in a claim red Leases (Official Form 1 ured by Property. If more s	. Also list executory of 106G). Do not include pace is needed, copy to	contracts on Schedule A/B: P any creditors with partially so the Part you need, fill it out, n	PRIORITY claims. List the other party to roperty (Official Form 106A/B) and on ecured claims that are listed in number the entries in the boxes on the op of any additional pages, write your
	All of Your PRIORITY Un				
	tors have priority unsecured	d claims against you?			
No. Go to	Part 2.				
☐ Yes.					
Part 2: List A	All of Your NONPRIORIT	Y Unsecured Claims			
	tors have nonpriority unsec				
′	ave nothing to report in this pa		ourt with your other ashe	adula a	
Yes.	ave nothing to report in this pa	art. Submit this form to the co	ourt with your other some	eulles.	
unsecured cla	im, list the creditor separately	for each claim. For each cla	im listed, identify what t	ype of claim it is. Do not list cla	or has more than one nonpriority ims already included in Part 1. If more aims fill out the Continuation Page of
					Total claim
4.1 Amex		Last 4 digits	s of account number	5533	\$5,828.00
PO Bo	ty Creditor's Name x 981537	When was t	the debt incurred?	3/1999	
	o, TX 79998 Street City State Zip Code	As of the da	ate you file, the claim i	s: Check all that apply	
	urred the debt? Check one.		,		
■ Debto	or 1 only	☐ Continge	ent		
☐ Debto	or 2 only	☐ Unliquida			
☐ Debto	or 1 and Debtor 2 only	☐ Disputed			
	st one of the debtors and and	ther Type of NO	NPRIORITY unsecured	d claim:	
☐ Chec	k if this claim is for a comm	nunity	loans		
debt	aim subject to offset?		ns arising out of a sepa ority claims	ration agreement or divorce that	at you did not
■ No		☐ Debts to	pension or profit-sharin	g plans, and other similar debts	;
☐ Yes		Other. S	pecify Revolving	Credit	

Debtor Debtor	1 Robert W MacDowell 2 Maureen E MacDowell		Case number (if known)	
4.2	Capital One Nonpriority Creditor's Name	Last 4 digits of account number	1287	\$10,093.00
	PO Box 30285 Salt Lake City, UT 84130-0285	When was the debt incurred?	7/2009	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	No	Debts to pension or profit-sharir	ng plans, and other similar debts	
	Yes	Other. Specify Revolving	Credit	
4.3	Capital One	Last 4 digits of account number	3175	\$9,626.00
	Nonpriority Creditor's Name PO Box 30285 Salt Lake City, UT 84130-0285	When was the debt incurred?	9/2019	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	■ Other. Specify Revolving business c	Credit redit	
4.4	CB/Pottery Barn	Last 4 digits of account number	9816	\$1,446.00
	Nonpriority Creditor's Name 3075 Loyalty Circle PO Box 182789	When was the debt incurred?	2/2017	
	Columbus, OH 43218 Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharir	•	
	☐ Yes	Other. Specify Revolving	Credit	

Debtor Debtor	1 Robert W MacDowell 2 Maureen E MacDowell		Case number (if known)	
4.5	CB/SonyVisa	Last 4 digits of account number	5086	\$11,395.00
	Nonpriority Creditor's Name 3075 Loyalty Circle PO Box 182789	When was the debt incurred?	4/1996	
	Columbus, OH 43218 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	☐ Debtor 1 only ☐ Debtor 2 only	☐ Contingent☐ Unliquidated		
	□ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community	☐ Disputed Type of NONPRIORITY unsecured ☐ Student loans	d claim:	
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Revolving	Credit	
4.6	CB/Wayfair	Last 4 digits of account number	9130	\$5,156.00
	Nonpriority Creditor's Name PO Box 182789 Columbus, OH 43218	When was the debt incurred?	10/2019	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Revolving	Credit	
4.7	Citicards CBNA Nonpriority Creditor's Name	Last 4 digits of account number	2111	\$26,915.00
	5800 South Corporate Plac Mail Code 234	When was the debt incurred?	1/2000	
	Sioux Falls, SD 57108	_		
	Number Street City State Zip Code	As of the date you file, the claim	s: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed	d claim:	
	At least one of the debtors and another	Type of NONPRIORITY unsecured ☐ Student loans	J Claiii.	
	Check if this claim is for a community debt	☐ Obligations arising out of a sepa	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	No No	Debts to pension or profit-sharin		
	Yes	Other. Specify Revolving	Credit	

	1 Robert W MacDowell 2 Maureen E MacDowell		Case number (if known)			
4.0	Diagona Bonk	1 4 - 11 - 14 f	6240	£20.270.00		
4.8	Discover Bank Nonpriority Creditor's Name PO Box 15316 Attn: CMS/Prod Develop	Last 4 digits of account number When was the debt incurred?	1/2005	\$20,379.00		
-	Wilmington, DE 19850-5316 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply			
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not			
	No	Debts to pension or profit-sharing	g plans, and other similar debts			
	Yes	Other. Specify Revolving	Credit			
4.9	Ed Financial/ESA	Last 4 digits of account number	2274	\$166.00		
	Nonpriority Creditor's Name 120 N. Seven Oaks Drive Knoxville. TN 37922	When was the debt incurred?	9/1999			
-	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply			
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
	☐ Check if this claim is for a community	Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts			
	☐ Yes	Other. Specify				
		Student Lo	an			
4.1	Ed Financial/ESA	Last 4 digits of account number	2374	\$141.00		
	Nonpriority Creditor's Name 120 N. Seven Oaks Drive Knoxville, TN 37922	When was the debt incurred?	3/1999			
-	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply			
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	<u> </u>				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
	☐ Check if this claim is for a community	Student loans				
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharing				
	☐ Yes	☐ Other. Specify				
	Student Loan					

Debto Debto	r 1 Robert W MacDowell r 2 Maureen E MacDowell		Case number (if known)					
4.1 1	Kohls - Capital One	Last 4 digits of account number	7065	\$2,009.00				
	Nonpriority Creditor's Name P.O. Box 3115	When was the debt incurred?	4/2007					
	Milwaukee, WI 53201 Number Street City State Zip Code	As of the date you file, the claim	s: Check all that apply	-				
	Who incurred the debt? Check one. ☐ Debtor 1 only	_						
	_	Contingent						
	Debtor 2 only	Unliquidated						
	Debtor 1 and Debtor 2 only	Disputed						
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:					
	☐ Check if this claim is for a community	☐ Student loans						
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not					
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts					
	Yes	Other. Specify Revolving	Credit	-				
4.1	Sears	Last 4 digits of account number	8349	\$2,083.00				
	Nonpriority Creditor's Name PO Box 6497	When was the debt incurred?	6/2000					
	Sioux Falls, SD 57117-6497 Number Street City State Zip Code	As of the date you file, the claim	s: Check all that apply					
	Who incurred the debt? Check one.	As of the date you me, the claim	s. Oneon all that apply					
	Debtor 1 only	☐ Contingent						
	Debtor 2 only	☐ Unliquidated						
	☐ Debtor 1 and Debtor 2 only	☐ Disputed						
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:					
	☐ Check if this claim is for a community	☐ Student loans						
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not					
	No	Debts to pension or profit-sharin	g plans, and other similar debts					
	☐ Yes	■ Other. Specify Revolving						
				-				
4.1 3	Sofi Lending Corp Nonpriority Creditor's Name	Last 4 digits of account number	2658	\$32,374.00				
	2750 East Cottonwood Pky Suite 300	When was the debt incurred?	7/2018	-				
	Salt Lake City, UT 84121							
	Number Street City State Zip Code	As of the date you file, the claim	s: Check all that apply					
	Who incurred the debt? Check one.							
	☐ Debtor 1 only	☐ Contingent						
	Debtor 2 only	☐ Unliquidated						
	■ Debtor 1 and Debtor 2 only	☐ Disputed						
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:						
	☐ Check if this claim is for a community	☐ Student loans						
	debt Is the claim subject to offset?	 Obligations arising out of a separeport as priority claims 	ration agreement or divorce that you did not					
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts					
	☐ Yes	Other Specify Installment	• •					
	-	- Other opening		_				

	Maureen E MacDowell	Case number (if known)						
4.1	Syncb / PPC	Last 4 digits of account number	1195	\$2,263.00				
	Nonpriority Creditor's Name PO Box 965005	When was the debt incurred?	1/2020					
	Orlando, FL 32896 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply					
	☐ Debtor 1 only	☐ Contingent						
	Debtor 2 only	☐ Unliquidated						
	☐ Debtor 1 and Debtor 2 only	☐ Disputed						
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:					
	☐ Check if this claim is for a community	☐ Student loans						
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not					
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts					
	☐ Yes	Other. Specify Revolving	Credit					
4.1	SYNCH / Care Credit	Last 4 digits of account number	3738	\$1,618.00				
	Nonpriority Creditor's Name PO Box 965036	When was the debt incurred?	4/2020	·				
	Orlando, FL 32896-5036 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply					
	Debtor 1 only							
	_	☐ Contingent						
	Debtor 2 only	Unliquidated						
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured	d alaim.					
	At least one of the debtors and another	Student loans	a ciaim:					
	☐ Check if this claim is for a community debt		ration agreement or divorce that you did not					
	Is the claim subject to offset?	report as priority claims						
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts					
	☐ Yes	Other. Specify Revolving	Credit					
4.1	Target / TD Bank	Last 4 digits of account number	7694	\$5,354.00				
6	Nonpriority Creditor's Name			Ψο,οοοο				
	3701 Wayzata Blvd. Minneapolis, MN 55416	When was the debt incurred?	5/2008					
	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply					
	Who incurred the debt? Check one.							
	☐ Debtor 1 only	☐ Contingent						
	■ Debtor 2 only	☐ Unliquidated						
	☐ Debtor 1 and Debtor 2 only	☐ Disputed						
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:					
	☐ Check if this claim is for a community debt		ration agreement or divorce that you did not					
	Is the claim subject to offset?	report as priority claims						
	No	Debts to pension or profit-sharin						
	☐ Yes	Other. Specify Revolving	Credit					

Authority Creditor's Name PO Box 14517 CBS MAC F8235-01C Des Minlers, 1A 50306 Number Street Cby Stame 7c Check or on Deliber 1 and Deliber 2 and Deliber 2 and Deliber 2 and Deliber 2 and Deliber 2 and Deliber 2 and Deliber 2 and Deliber 3 and Deliber 2 and Deliber 3 and Delibe			/ MacDowell E MacDowell		Case nu	umber (if known)			
Notoprotivy Craditor's Name PO Box 14517 CBS MAC F8235-01C Des Minies, IA 50306 Number Street City State 2p Dose Who incurred the defir? Check one.	4.1	WF Bank. N	NA	Last 4 digits of account number	7105			\$5.136.00	
Des Moines, IA 50306 Number Street City States 20 poole Who Incurred the debt? Check one.		Nonpriority Cre PO Box 14	ditor's Name 517	•	11/20)16			
Debtor 1 only		Des Moines	s, IA 50306	As of the date you file, the claim	is: Check	call that apply			
Debtor 2 only Unliquidated Debtor 3 and petitor 2 only Debtor 1 and Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 3 only 1 only 2 only Debtor 2 only Debtor 3 only		Who incurred	the debt? Check one.						
Debtor 1 and Debtor 2 only Disputed		Debtor 1 on	ıly	☐ Contingent					
At least one of the debtors and another Check if this claim is for a community debt Student loans Check if this claim is for a community debt Student loans Check if this claim subject to offset? Chelgators arising out of a separation agreement or divorce that you did not report as promy claims Check if this claim subject to offset? Check if this claim subject to offset? Check if this claim subject to offset? Check if this claim is for a community debt Check if this claim is for a check if this claim is check if this check if this check if this check if this check if		■ Debtor 2 on	ıly	☐ Unliquidated					
Check if this claim is for a community debt Chilipations arising out of a separation agreement or divorce that you did not report as protry claims		Debtor 1 an	nd Debtor 2 only	☐ Disputed					
Collegations arising out of a separation agreement or divorce that you did not report as profity claims				Type of NONPRIORITY unsecure	d claim:				
Is the claim subject to offset? No		☐ Check if this claim is for a community		☐ Student loans					
Poebs to pension or profit-sharing plans, and other similar debts Poebs to pension or profit-sharing plans, and other similar debts Poebs to pension or profit-sharing plans, and other similar debts Poebs to pension or profit-sharing plans, and other similar debts Poebs to pension or profit-sharing plans, and other similar debts \$1,394.00			.h.;+.4#+0		aration ag	reement or divor	ce that you did no	ot	
WF/Bobs Discont Furniture Norpromy Creditor's Name PO Box 14517 CBS MAC F8235-01C Des Molnes, IA 50306 Number Street City State Zip Code Who Incurred the debt? Check one. Debtor 1 only Debtor 1 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? Debtor 1 on State City Special Zip Code Who Incurred Tipe Check if this claim is for a community debt Undiquidated Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 only Check if this claim is for a community debt Undiquidated Debtor 2 only Debtor 1 only Check if this claim is for a community debt Undiquidated Debtor 2 only Debtor 1 only Check if this claim is for a community debt Undiquidated Debtor 2 only Debtor 2 only Debtor 3 only Type of NONPRIORITY unsecured claim: Student loans Debts to persion or profit-sharing plans, and other similar debts Debts to persion or profit-sharing plans, and other similar debts Debts to persion or profit-sharing plans, and other similar debts Debts to persion or profit-sharing plans, and other similar debts Debts to persion or profit-sharing plans, and other similar debts Debts to persion or profit-sharing plans, and other similar debts Debts to persion or profit-sharing plans, and other similar debts Debts to persion or profit-sharing plans, and other similar debts Debts to persion or profit-sharing plans, and other similar debts Debts to persion or profit-sharing plans, and other similar debts Debts to persion or profit-sharing plans, and other similar debts Debts to persion or profit-sharing plans, and other similar debts Debts to persion or profit-sharing plans, and other similar debts Debts to persion or profit-sharing plans, and other similar debts Debts to persion or profit-sharing plans, and other similar debts Debts to persion or profit-sharing plans, and other similar debts Debts to persion or profit-sharing plans, and other similar debts Debts to persion or profit-sharing pla		_	ibject to offset?		ممام م	and other similar	dahta		
WF/Bobs Discort Furniture Nonprionity Creditor's Name PO Box 14517 CBS MAC F8235-01C Des Molines; IA 50306 Number Street (1ry State Zip Code Who incurred the debt? Check one. Debtor 1 only Contingent Unliquidated Debtor 1 and Debtor 2 only Debtor 3 only Debtor 3 only Debtor 3 only Debtor 4 only Debtor 4 only Debtor 4 only Debtor 4 only Debtor 5 only Debtor 5 only Debtor 5 only Debtor 6 only Debtor 6 only Debtor 6 only Debtor 7 only Debtor 6 only Debtor 7 only Debtor 6 only Debtor 7 only Debtor 8 only Debtor 9 onl				·	•	and other similar	debts		
Nonpriority Creditors Name PO Box 14517 When was the debt incurred? 12/2019 12		Yes		Other. Specify Revolving	Credit				
PO Box 14517 CBS MAC F8235-01C Des Moines, IA 50306 Number Sireet City State 2 pC Code Who incurred the debt? Check one.				Last 4 digits of account number	3603			\$1,394.00	
CBS MAC F8235-01C Des Moines, IA 50306 Number Street City State 2tp Code Who incurred the debt? Check one. Debtor 1 only				When was the debt incurred?	12/20	119			
Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only Contingent Debtor 2 only Unliquidated Debtor 2 only Unliquidated Debtor 1 on and Debtor 2 only Unliquidated Disputed Type of NoNPRIORITY unsecured claim: Student loans Student loans Student loans Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims No Debts to pension or profit-sharing plans, and other similar debts Part 3: List Others to Be Notified About a Debt That You Already Listed Subset his page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2. For example, if a collection agency have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. Part 4: Add the Amounts for Each Type of Unsecured Claims Total Observed Claims Total Priority. Add lines 6a through 6d. Some submit of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each other priority. Add lines 6		CBS MAC	F8235-01C	Wilder Was the dest insurred.	12/20	,13			
Debtor 1 only Debtor 2 only Unliquidated Debtor 2 only Disputed Type of NONPRIORITY unsecured claim: Student loans Debtor 1 and Debtor 2 only Disputed Type of NONPRIORITY unsecured claim: Student loans Debtor 1 and Debtor 2 only Disputed Type of NONPRIORITY unsecured claim: Student loans Debtor 1 and Debtor 2 only Debtor 1 and Debtor 3 only it is claim is for a community debt Student loans Debtor 1 and other similar debts Debtor 1 and other similar debtor 1 and other similar debts Debtor 1 and other similar debtor 1 and other simi				As of the date you file, the claim	is: Check	all that apply			
Debtor 2 only Unliquidated Debtor 1 and Debtor 2 only Disputed Type of NONPRIORITY unsecured claim: Type of NonPRIORITY unsecured claim: Disputed Type of NonPRIORITY unsecured claim: Student loans Debtor 1 and Debtor 2 only Disputed Type of NonPRIORITY unsecured claim: Student loans Debtor 1 as priority claims Debtor 2 only Debtor 1 as priority claims Debtor 2 only Debtor 1 as priority claims Debtor 3 priority claims Debtor 3 priority claims Debtor 3 priority claims Debtor 4 priority claims Debtor 5 priority claims Debtor 5 priority claims Debtor 5 priority claims Debtor 6 priority claims Debtor 7 priority claims Debtor 6 priority claims Debtor 6 priority claims Debtor 7 priority claims Debtor 6 priority 6 priority 6 priority 6 priority claims Debtor 7 priority 6		Who incurred	the debt? Check one.						
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Is the claim subject to offset? report as priority claims No		☐ Check if th	is claim is for a community	☐ Student loans					
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6f. Student loans 6f. \$ 307.00		6e.	Total Priority. Add lines 6a throug	gh 6d.	6e.	\$	0.0	00	
Total						Tot	al Claim		
	Total claims	6f.	Student loans		6f.	\$	307.0	00	

		MacDowell E MacDowell	Case nu	mber (if known)		
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00	
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00	
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	143,069.00	
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	143,376.00	

Fill in this inform	nation to identify your					
Debtor 1	Robert W MacDowell					
	First Name	Middle Name	Last Name			
Debtor 2	Maureen E MacDo					
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Bar	nkruptcy Court for the:	EASTERN DISTRICT O	F NEW YORK			
Case number						
(if known)						Check if this is an
						amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

ı	Person or	company with	whom you have the	e contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			
	City		State	ZIP Code	
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	<u> </u>
2.3	Oity		Otate	Zii Code	
0	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.4					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.5	Oity		Oldio	Zii Oodo	
	Name				_
	Number	Street			_
	City		State	ZIP Code	_

Official Form 106G

Case 8-20-72995-ast Doc 1 Filed 09/22/20 Entered 09/22/20 10:24:32

Debtor 1	Robert W MacDo	owell			
Dobtor 2	First Name	Middle Name	Last Name		
Debtor 2 Spouse if, fil	ing) Maureen E MacI	Middle Name	Last Name		
Jnited Sta	ates Bankruptcy Court for the:	EASTERN DISTRICT (OF NEW YORK		
Case num	ber				☐ Check if this is an
	l Form 106H	Lildana			amended filing
<u>sched</u>	dule H: Your Cod	debtors			12/15
				r y? (Community propert	y states and territories include
■ No □ Ye 3. In Co in line	. Go to line 3. s. Did your spouse, former spouse, former spouse. lumn 1, list all of your codebee 2 again as a codebtor only	ouse, or legal equivalent liv otors. Do not include your if that person is a guarar	e with you at the time? r spouse as a codebto ntor or cosigner. Make	r if your spouse is filing sure you have listed th	g with you. List the person shown
No Ye 3. In Co in line Form	. Go to line 3. s. Did your spouse, former spouse, former spouse. lumn 1, list all of your codebee 2 again as a codebtor only	ouse, or legal equivalent liv otors. Do not include your if that person is a guarar	e with you at the time? r spouse as a codebto ntor or cosigner. Make	r if your spouse is filing sure you have listed th	
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Fill	in this information to identify	volir case.							
		t W MacDowell							
	otor 2 Maure	en E MacDowell			_				
Uni	ted States Bankruptcy Court	for the: EASTERN DISTRIC	T OF NEW YORK		_				
	se number nown)		_			Check if this is: An amende A supplement	d filing ent sho	wing postpetition	chapter
O	fficial Form 106I					MM / DD/ Y		ne following date:	
S	chedule I: Your	Income				ו יוסט יוויוויו			12/15
sup spo atta	plying correct information. use. If you are separated a	is possible. If two married pe If you are married and not fil ind your spouse is not filing v form. On the top of any addit	ing jointly, and your with you, do not inclu	spouse i de infori	s liv nati	ing with you, incluen about your spo	ude inf ouse. If	ormation about more space is i	your needed,
1.	Fill in your employment information.		Debtor 1			Debtor 2	or no	n-filing spouse	
	If you have more than one		☐ Employed			■ Emplo		3 - 1	
	attach a separate page with information about additional		■ Not employed	Not employed			☐ Not employed		
	employers.	Occupation				Teache	r		
	Include part-time, seasona self-employed work.	Employer's name				Three V	/llage	CSD	
	Occupation may include strong or homemaker, if it applies.					100 Suf Stony E		venue NY 11790	
		How long employed	there?				2 yea	rs	
Par	Give Details Abo	ut Monthly Income							
	mate monthly income as o	f the date you file this form. It	f you have nothing to r	eport for	any	ine, write \$0 in the	space	. Include your nor	n-filing
	u or your non-filing spouse he space, attach a separate sh	ave more than one employer, oneet to this form.	combine the informatio	n for all e	emple	oyers for that perso	n on th	ne lines below. If y	ou need
						For Debtor 1		Debtor 2 or -filing spouse	
2.		s, salary, and commissions (lonthly, calculate what the month		2.	\$	0.00	\$	11,772.84	
3.	Estimate and list monthly	overtime pay.		3.	+\$	0.00	+\$	0.00	
4.	Calculate gross Income.	Add line 2 + line 3.		4.	\$	0.00	\$	11,772.84	

Official Form 106I Schedule I: Your Income page 1

Deb Deb	tor 1 tor 2	Robert W MacDowell Maureen E MacDowell	_	(Case number (<i>if kr</i>	nown)				
	Com	ny line 4 hore	4		For Debtor 1	200		or Debtor on-filing s	pouse	
	Cop	by line 4 here	4.		\$	0.00	ф	11,	772.84	<u>-</u>
5.	List	all payroll deductions:								
	5a.	Tax, Medicare, and Social Security deductions	5a.		\$ 0	0.00	\$	3,	282.39)
	5b.	Mandatory contributions for retirement plans	5b.		\$ (0.00	\$		0.00	<u> </u>
	5c.	Voluntary contributions for retirement plans	5c.		\$ (0.00	\$		0.00)
	5d.	Required repayments of retirement fund loans	5d.			0.00	\$		686.83	_
	5e.	Insurance	5e.		. —	0.00	\$		489.06	_
	5f.	Domestic support obligations	5f.			0.00	\$		0.00	_
	5g.	Union dues	5g.			0.00	\$		6.50	_
	5h.	Other deductions. Specify:	5h.	.+	\$	0.00	+ \$		0.00	_
6.	Add	I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$	0.00	\$	4,	464.78	<u>} </u>
7.	Cald	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$	0.00	\$	7,	308.06	<u>5</u>
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.		\$	0.00	\$		0.00	•
	8b.	Interest and dividends	8b.		·	0.00	\$		0.00	_
	8c. 8d.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. Unemployment compensation	8c. 8d.		\$	0.00	\$		0.00	<u> </u>
	8e.	Social Security	8e.		\$	0.00	\$		0.00	<u> </u>
	8f. 8g.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income	8f. 8g.		\$ (0.00	\$		0.00)
	8h.	Other monthly income. Specify:	8h.	.+	\$	0.00	+ \$		0.00	_
9.	Add	l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	9	S	0.00	\$		0.0	0
10.	Cald	culate monthly income. Add line 7 + line 9.	10.	\$	0.00	+ \$	-	7,308.06	= \$	7,308.06
	Add	the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		_				,		,
11.	Inclu othe	te all other regular contributions to the expenses that you list in Schedul adde contributions from an unmarried partner, members of your household, your friends or relatives. not include any amounts already included in lines 2-10 or amounts that are no cify:	ır depe		. •		-			0.00
12.		I the amount in the last column of line 10 to the amount in line 11. The re e that amount on the Summary of Schedules and Statistical Summary of Certa lies							\$	7,308.06
13.	Do y	you expect an increase or decrease within the year after you file this form	n?							ly income
		Yes. Explain:								

Official Form 106l Schedule I: Your Income page 2

Fill	I in this informa	ation to identify yo	our case:						
Del	btor 1	Robert W Ma	acDowell			Ch	eck if	this is:	
	btor 2	Maureen E N	/lacDowe	II			As		ving postpetition chapter the following date:
` .		ruptcy Court for the	: EASTE	RN DISTRICT OF NEW Y	ORK		MM	1 / DD / YYYY	
		.,.,							
1	se number known)								
0	official Fo	orm 106J							
S	chedule	J: Your	Exper	ises					12/1
inf	ormation. If m		eded, atta	If two married people ar ch another sheet to this n.					
Pa 1.	Is this a joi	ribe Your House	hold						
١.	□ No. Go to								
	_	es Debtor 2 live	in a separ	ate household?					
	■ N								
			st file Offici	al Form 106J-2, Expenses	s for Separate House	ehold of De	ebtor :	2.	
2.	Do you hav	e dependents?	□ No						
	Do not list D Debtor 2.	•	Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto			Dependent's age	Does dependent live with you?
	Do not state dependents				Daughter			14 years	□ No ■ Yes
					Son			16 years	□ No ■ Yes
					-		_		□ No
									☐ Yes
									□ No □ Yes
3.	expenses of	penses include of people other t d your depende	han $_{m \Box}$	No Yes					1 100
Es ex	timate your e	a date after the l	our bankr	y Expenses uptcy filing date unless y y is filed. If this is a supp					
the		h assistance an		government assistance i luded it on <i>Schedule I:</i> \				Your expe	enses
4.		or home owners nd any rent for th		ses for your residence. I	nclude first mortgag	e 4.	\$_		2,667.00
	If not include	ded in line 4:							
	4a. Real	estate taxes				4a.	\$		0.00
		erty, homeowner's	s, or renter	's insurance		4b.	_		0.00
				ipkeep expenses		4c.	. –		0.00
5		eowner's associat		dominium dues our residence, such as bo	mo oquity loons	4d. 5	\$ \$		0.00

	tor 1 Robert W MacDowell tor 2 Maureen E MacDowell	Case num	ber (if known)	
6.	Utilities:			
0.	6a. Electricity, heat, natural gas	6a.	\$	500.00
	6b. Water, sewer, garbage collection	6b.	\$	50.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	194.00
	6d. Other. Specify: cellphone	6d.	\$	350.00
7.	Food and housekeeping supplies		\$	925.00
8.	Childcare and children's education costs	8.	\$	0.00
9.	Clothing, laundry, and dry cleaning	9.	\$	125.00
10.	Personal care products and services	10.	\$	200.00
11.	Medical and dental expenses	11.	\$	850.00
12.	Transportation. Include gas, maintenance, bus or train fare.		•	250.00
	Do not include car payments.	12.	\$	250.00
	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	0.00
14.		14.	\$	0.00
15.	Insurance. Do not include incurance deducted from your pay or included in lines 4 or 20			
	Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance	15a.	\$	80.00
	15b. Health insurance	15b.	·	0.00
	15c. Vehicle insurance	15c.	\$	250.00
	15d. Other insurance. Specify:	15d.	·	0.00
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.		Ψ	0.00
	Specify:	16.	\$	0.00
17.	Installment or lease payments: 17a. Car payments for Vehicle 1	17a.	¢	789.00
	17b. Car payments for Vehicle 2	17a. 17b.	\$	0.00
	17c. Other. Specify:	17b.	\$	0.00
	17d. Other. Specify:	17d.	· -	0.00
18	Your payments of alimony, maintenance, and support that you did not report as		Ψ	0.00
	deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	0.00
19.	Other payments you make to support others who do not live with you.		\$	0.00
	Specify:	19.		
20.	Other real property expenses not included in lines 4 or 5 of this form or on Scheo			
	20a. Mortgages on other property	20a.	· -	0.00
	20b. Real estate taxes	20b.		0.00
	20c. Property, homeowner's, or renter's insurance	20c.	·	0.00
	20d. Maintenance, repair, and upkeep expenses	20d.	·	0.00
	20e. Homeowner's association or condominium dues	20e.	· ·	0.00
21.	-1/	21.	+\$	0.00
22.	Calculate your monthly expenses		_	
	22a. Add lines 4 through 21.		\$	7,230.00
	22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
	22c. Add line 22a and 22b. The result is your monthly expenses.		\$	7,230.00
23.	Calculate your monthly net income.			
	23a. Copy line 12 (your combined monthly income) from Schedule I.	23a.	·	7,308.06
	23b. Copy your monthly expenses from line 22c above.	23b.	-\$	7,230.00
	23c. Subtract your monthly expenses from your monthly income. The result is your <i>monthly net income</i> .	23c.	\$	78.06
24.	Do you expect an increase or decrease in your expenses within the year after you For example, do you expect to finish paying for your car loan within the year or do you expect your modification to the terms of your mortgage? No.			or decrease because of a
	☐ Yes. Explain here:			

Fill in this infor	mation to identify your	case:					
Debtor 1	Robert W MacDov	well					
	First Name	Middle Name	Las	t Name			
Debtor 2	Maureen E MacDo						
(Spouse if, filing)	First Name	Middle Name	Las	st Name			
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT OF	NEW YO	RK			
Case number							
(if known)						Check if this is a amended filing	n
If two married po You must file thi obtaining mone years, or both. 1	eople are filing together is form whenever you fi y or property by fraud ir 8 U.S.C. §§ 152, 1341, 1	connection with a bankr	sible for s	upplyired sche	ng correct information. dules. Making a false sta	tement, concealing propert 00, or imprisonment for up	
Sig	n Below						
Did you pa	ay or agree to pay some	one who is NOT an attorn	ey to help	you fil	l out bankruptcy forms?		
■ No							
☐ Yes. I	Name of person					nkruptcy Petition Preparer's N n, and Signature (Official Fori	
	alty of perjury, I declare re true and correct.	that I have read the summ	ary and s	chedul	es filed with this declarat	ion and	
X /s/ Rol	bert W MacDowell		Х	/s/ M:	aureen E MacDowell		
	t W MacDowell		_ ^		een E MacDowell		
Signatu	re of Debtor 1				ure of Debtor 2		
Date	September 16, 2020			Date	September 16, 2020		
_			-				

Fill in this inform								
	mation to identify you							
Debtor 1	Robert W MacDo	Middle Name	Last Name					
Debtor 2	Maureen E Mac	Dowell						
(Spouse if, filing)	First Name	Middle Name	Last Name					
United States Ba	inkruptcy Court for the:	EASTERN DISTRICT OF	NEW YORK					
Case number								
(if known)					☐ Check if this is an			
					amended filing			
~								
Official Fo								
Statement	of Financial	Affairs for Indivi	duals Filing for B	ankruptcy	4/19			
information. If n		attach a separate sheet to	are filing together, both are this form. On the top of an					
Part 1: Give I	Details About Your Ma	nrital Status and Where You	ı Lived Before					
1. What is you	ır current marital statı	ıs?						
■ Married	I							
☐ Not ma	rried							
2. During the	ast 3 years, have you	lived anywhere other than	where you live now?					
□ No								
Yes. Lis	st all of the places you I	ived in the last 3 years. Do n	ot include where you live now	I.				
Debtor 1 P	rior Address:	Dates Debtor 1	Debtor 2 Prior Ad	ldress:	Dates Debtor 2			
Desici III	nor Address.	lived there	DODIOI Z I HOI AC	Debitor 2 Filor Address.				
	stone Lane iver, NY 11792	From-To: 5/2003 - 12/2 0	Same as Debtor	1	Same as Debtor 1 From-To:			
			gal equivalent in a commun vada, New Mexico, Puerto R					
■ No								
_	ake sure you fill out <i>Scl</i>	hedule H: Your Codebtors (O	fficial Form 106H).					
	•		,					
Part 2 Expla	in the Sources of You	r Income						
Fill in the tot	al amount of income yo	u received from all jobs and	ng a business during this yeall businesses, including parter together, list it only once ur	-time activities.	endar years?			
□ No								
Yes. Fi	ll in the details.							
		Debtor 1		Debtor 2				
		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)			
From January 1 of current year until		☐ Wages, commissions,	\$0.00	■ Wages, commissions,	\$97,805.04			
the date you file	ed for bankruptcy:	bonuses, tips		bonuses, tips	•			
		☐ Operating a business		☐ Operating a business				
Official Form 107		Statement of Financial Af	Statement of Financial Affairs for Individuals Filing for Bankruptcy page 1					

	laureen E N								
			Sources of Check all the		Gross income (before deductions)		Sources of inc Check all that a		Gross income (before deductions and exclusions)
For last calendar year: (January 1 to December 31, 2019)		☐ Wages, bonuses, tip	commissions, ps	bonuses, tips			missions,	\$133,595.00	
			☐ Operatir	ng a business			☐ Operating a	business	
For the calendar year before that: (January 1 to December 31, 2018)			☐ Wages, commissions, bonuses, tips \$0.00			■ Wages, commissions, bonuses, tips \$231,402.00			
			☐ Operatir	ng a business			☐ Operating a	business	
winnings List each	. İf you are fili	ng a joint cas	se and you ha	eve income that	you received toge	ther, list it o	hat you listed in lin	ebtor 1.	nd gambling and lottery
			Debtor 1				Debtor 2		
			Sources of Describe be		Gross income each source (before deduce exclusions)		Sources of incorporation Describe below.		Gross income (before deductions and exclusions)
	From January 1 of current year until the date you filed for bankruptcy:		Unemploy	ment	\$1	0,530.00			
For last cale (January 1 to		31, 2019)	Unemploy	/ment	\$1	1,700.00			
Part 3: Lis	st Certain Pa	yments You	Made Before	e You Filed for	Bankruptcy				
	er Debtor 1's Neither De	or Debtor 2 ebtor 1 nor D	's debts prin Debtor 2 has	narily consume	er debts? umer debts. Con	sumer debt	s are defined in 11	U.S.C. § 10	01(8) as "incurred by an
		,	,	or bankruptcy, d	id you pay any cre	editor a tota	l of \$6,825* or mor	re?	
	□ _{No.} □ _{Yes}	Go to line 7		to whom you no	id a total of ¢6 00	E* or moro i	n one or more now	monto and	the total amount you
		paid that cr not include	editor. Do not payments to	t include paymer an attorney for t	nts for domestic s his bankruptcy ca	upport oblig se.		ild support a	and alimony. Also, do
■ Yes				primarily consu or bankruptcy, d		editor a tota	l of \$600 or more?		
	□ _{No.}	Go to line 7	7 .						
	■ Yes	List below e include pay	each creditor	mestic support o			the total amount poort and alimony. A		at creditor. Do not include payments to an
Credito	r's Name and	d Address		Dates of payme	ent Total	amount paid	Amount you still owe	Was this	payment for
						paid	Sun Owe		

	btor 1 Robert W MacDowell btor 2 Maureen E MacDowell		Cas	se number (if known)		
	Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this pa	yment for
	Sofi Lending Corp 2750 East Cottonwood Pky Suite 300 Salt Lake City, UT 84121	5/2020	\$943.00	\$32,374.00	☐ Mortgage ☐ Car ☐ Credit Ca ■ Loan Rep ☐ Suppliers ☐ Other	ard payment
7.	Within 1 year before you filed for bankrup Insiders include your relatives; any general pof which you are an officer, director, person is a business you operate as a sole proprietor. alimony.	partners; relatives of any gen in control, or owner of 20% o	eral partners; partner r more of their voting	erships of which yog g securities; and a	ou are a genera ny managing a	al partner; corporations gent, including one for
	NoYes. List all payments to an insider.					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
8.	Within 1 year before you filed for bankrup insider? Include payments on debts guaranteed or co No Yes. List all payments to an insider		ments or transfer a	any property on a	ccount of a de	ebt that benefited an
	Insider's Name and Address	Dates of payment	Total amount	Amount you	Reason for	this payment
			paid	still owe	Include cred	itor's name
9.	Within 1 year before you filed for bankrup List all such matters, including personal injur modifications, and contract disputes. No Yes. Fill in the details.	otcy, were you a party in an				
	Case title Case number	Nature of the case	Court or agency		Status of th	e case
10.	Within 1 year before you filed for bankrup Check all that apply and fill in the details belo No. Go to line 11. Yes. Fill in the information below. Creditor Name and Address	Describe the Property		oreclosed, garnis	shed, attached	I, seized, or levied? Value of the property
11.	Within 90 days before you filed for bankru accounts or refuse to make a payment be No Yes. Fill in the details.	cause you owed a debt?	luding a bank or fir			
12.	Creditor Name and Address Within 1 year before you filed for bankrup court-appointed receiver, a custodian, or ■ No □ Yes			taker		Amount

	btor 2 Maureen E MacDowell	Case number	(if known)	
Pai	rt 5: List Certain Gifts and Contributions			
13.	Within 2 years before you filed for bankruptcy	, did you give any gifts with a total value of more t	han \$600 per person'	?
	No			
	Yes. Fill in the details for each gift.			
	Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
	Person to Whom You Gave the Gift and Address:			
14.	■ No	, did you give any gifts or contributions with a tota	l value of more than	\$600 to any charity?
	Yes. Fill in the details for each gift or contribu			
	Gifts or contributions to charities that total more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)	Describe what you contributed	Dates you contributed	Value
Pai	rt 6: List Certain Losses			
15.	Within 1 year before you filed for bankruptcy or gambling?	or since you filed for bankruptcy, did you lose any	thing because of thef	t, fire, other disaster
	No			
	☐ Yes. Fill in the details.			
	how the loss occurred Include	tribe any insurance coverage for the loss de the amount that insurance has paid. List pending ance claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost
Dat	rt 7: List Certain Payments or Transfers	, ,		
	Within 1 year before you filed for bankruptcy, consulted about seeking bankruptcy or prepare	did you or anyone else acting on your behalf pay or ring a bankruptcy petition? ers, or credit counseling agencies for services required		rty to anyone you
	□ No			
	Yes. Fill in the details.			
	Person Who Was Paid	Description and value of any property	Date payment	Amount of
	Address Email or website address Person Who Made the Payment, if Not You	transferred	or transfer was made	payment
	Ronald D. Weiss P.C.	\$4125 including \$3750 legal fee, \$310	\$500 paid	\$4,125.00
	734 Walt Whitman Road	filing fee, \$55 lien search, 35 credit	June 25, 2020	, ,
	Suite 203 Melville, NY 11747	counseling, \$25 credit report		
17.	Within 1 year before you filed for bankruptcy, promised to help you deal with your creditors Do not include any payment or transfer that you li		or transfer any prope	rty to anyone who
	■ No.			
	No Yes. Fill in the details.			
	Person Who Was Paid	Description and value of any property	Date payment	Amount of
	Address	transferred	or transfer was made	payment

	Debtor 1 Robert W MacDowell Debtor 2 Maureen E MacDowell					Case number (if known)				
	transf Include include	n 2 years before you filed for bankruptcy, erred in the ordinary course of your busice both outright transfers and transfers made e gifts and transfers that you have already lide. Yes. Fill in the details.	iness or financial affa e as security (such as the	irs? he granting of a s	-					
		on Who Received Transfer	Description and va		paym	ibe any property or ents received or debts n exchange	Date transfer was made			
	Perso	on's relationship to you			•	J				
	New	owners	Sold former resi Wading River.	idence in		gage on that erty paid in full.	12/2019			
	Buye	ers								
	benef	n 10 years before you filed for bankruptc iciary? (These are often called asset-protection do es. Fill in the details.		y property to a s	elf-settle	d trust or similar device	of which you are a			
	Name	e of trust	Description and va	alue of the propo	erty trans	sferred	Date Transfer was made			
							maue			
Par	t 8:	List of Certain Financial Accounts, Instru	uments, Safe Deposit	Boxes, and Sto	rage Unit	S				
	 Within 1 year before you filed for bankruptcy, sold, moved, or transferred? Include checking, savings, money market, or houses, pension funds, cooperatives, associa No Yes. Fill in the details. 		other financial accoun	nts; certificates o	of deposi					
			ast 4 digits of ccount number	Type of accour instrument	nt or	Date account was closed, sold, moved, or transferred	Last balance before closing of transfe			
21.		u now have, or did you have within 1 yea or other valuables?	ar before you filed for	bankruptcy, any	/ safe de _l	oosit box or other depos	itory for securities,			
		lo 'es. Fill in the details.								
		e of Financial Institution ess (Number, Street, City, State and ZIP Code)	Who else had acco Address (Number, St State and ZIP Code)		Describe	the contents	Do you still have it?			
22.	Have	you stored property in a storage unit or p	place other than your	home within 1 y	ear befo	re you filed for bankrupto	cy?			
	□ No ■ Yes. Fill in the details.									
		e of Storage Facility ess (Number, Street, City, State and ZIP Code)	to it? Address (Number, Street, City, State and ZIP Code) Us		Describe	the contents	Do you still have it?			
	Stor	age Unit				household items - proximately \$2000	□ No ■ Yes			

	tor 2 Maureen E MacDowell		Cas	e number (if known)	
Par	t 9: Identify Property You Hold or Control for S	Someone Else			
23.	Do you hold or control any property that someon for someone.	ne else owns? Include any prope	rty yo	u borrowed from, are storing for	, or hold in trust
	■ No □ Yes. Fill in the details.				
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Des	cribe the property	Value
Par	t 10: Give Details About Environmental Informa	tion			
For	the purpose of Part 10, the following definitions a	apply:			
	Environmental law means any federal, state, or I toxic substances, wastes, or material into the air regulations controlling the cleanup of these sub	r, land, soil, surface water, grour			
	Site means any location, facility, or property as of to own, operate, or utilize it, including disposal s	•	l law, v	whether you now own, operate, o	or utilize it or used
	Hazardous material means anything an environmental hazardous material, pollutant, contaminant, or s		s was	te, hazardous substance, toxic s	substance,
Rep	ort all notices, releases, and proceedings that yo	u know about, regardless of whe	n the	y occurred.	
24.	Has any governmental unit notified you that you	may be liable or potentially liabl	e und	er or in violation of an environme	ental law?
	■ No □ Yes. Fill in the details.				
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State a ZIP Code)		Environmental law, if you know it	Date of notice
25.	Have you notified any governmental unit of any	release of hazardous material?			
	■ No				
	Yes. Fill in the details.				
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State a ZIP Code)		Environmental law, if you know it	Date of notice
26.	Have you been a party in any judicial or adminis	trative proceeding under any en	vironm	nental law? Include settlements a	and orders.
	■ No □ Yes. Fill in the details.				
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nat	ure of the case	Status of the case
Par	t11: Give Details About Your Business or Conr	nections to Any Business			
27.	Within 4 years before you filed for bankruptcy, d	lid you own a business or have a	ny of	the following connections to any	/ business?
	☐ A sole proprietor or self-employed in a tr	rade, profession, or other activity	ر , eith،	er full-time or part-time	
	☐ A member of a limited liability company	(LLC) or limited liability partners	hip (L	LP)	
	☐ A partner in a partnership	· · · · · · · · · · · · · · · · · · ·		•	
	☐ An officer, director, or managing executi	ve of a corporation			
	☐ An owner of at least 5% of the voting or o	·	1		
			-		

Official Form 107

Debt Debt		obert W MacDowell aureen E MacDowell		Cas	se number (if known)
	No.	None of the above applies. Go to I	Part 12.		
	☐ Yes.	. Check all that apply above and fill	l in the details be	elow for each business.	
	Business Name Address (Number, Street, City, State and ZIP Code)			ature of the business	Employer Identification number Do not include Social Security number or ITIN.
					Dates business existed
		years before you filed for bankrupt ns, creditors, or other parties.	tcy, did you give	a financial statement to ar	nyone about your business? Include all financial
	No				
		Fill in the details below.			
	Name Address (Number, S	S Street, City, State and ZIP Code)	Date Issued		
Part	12: Sig	ın Below			
are tr	ue and c a bankru		false statement,	, concealing property, or ol	declare under penalty of perjury that the answers btaining money or property by fraud in connection ars, or both.
/s/ F	Robert V	V MacDowell	/s/ Ma	ureen E MacDowell	
		lacDowell		een E MacDowell	
Sign	ature of	Debtor 1	Signat	ure of Debtor 2	
Date	Septe	ember 16, 2020	Date	September 16, 2020	
Did v	ou attac	h additional pages to Your Stateme	ent of Financial A	Affairs for Individuals Filing	g for Bankruptcy (Official Form 107)?
■ No		, and the same page of the same of the sam			g , (
□ Ye	es				
		r agree to pay someone who is no	t an attorney to I	nelp you fill out bankruptcy	y forms?
■ No		of Person . Attach the Bankru	intov Petition Pro	parer's Notice Declaration of	and Signature (Official Form 110)
— 16	o. INAITH	on reison Attach the bankru	рксу ғешкіл етер	oarer s Nouce, Deciardion, d	and Signature (Official Forth 119).

Fill in this information to identify your case:						
Debtor 1	Robert W MacDowel	<u> </u>				
Debtor 2 (Spouse, if filing)	Maureen E MacDowe	ell				
United States E	Bankruptcy Court for the:	Eastern District of New York				
Case number (if known)						

Check as directed in lines 17 and 21:									
According to the calculations required by this Statement:									
1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).									
2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).									
3. The commitment period is 3 years.									
4. The commitment period is 5 years.									

☐ Check if this is an amended filing

Official Form 122C-1

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

04/20

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Calculate Your Average Monthly Income Part 1: 1. What is your marital and filing status? Check one only. □ Not married. Fill out Column A, lines 2-11. ■ Married. Fill out both Columns A and B. lines 2-11. Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space. Column A Column B Debtor 1 Debtor 2 or non-filing spouse 2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all 0.00 11,772.82 payroll deductions). Alimony and maintenance payments. Do not include payments from a spouse if 0.00 0.00 Column B is filled in. 4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Do not include payments from a spouse. Do not include payments 0.00 0.00 vou listed on line 3. 5. Net income from operating a business, Debtor 1 profession, or farm \$ 0.00 Gross receipts (before all deductions) 0.00 Ordinary and necessary operating expenses

0.00 Copy here -> \$

0.00 Copy here -> \$

0.00

0.00

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

Debtor 1

\$

-\$

\$

0.00

0.00

Net monthly income from a business, profession, or farm \$

6. Net income from rental and other real property

Ordinary and necessary operating expenses

Net monthly income from rental or other real property

Gross receipts (before all deductions)

0.00

0.00

btor 1 btor 2	Maureen E MacDowell			Case num	ber (<i>if know</i>	n)		
				Column Debtor 1		Column E Debtor 2 non-filing	or	
'. Inte	erest, dividends, and royalties			\$	0.0	\$	0.00	
. Une	employment compensation			\$	455.00	\$	0.00	
Do the	not enter the amount if you contend that the an Social Security Act. Instead, list it here:	nount received was a ben	efit under					
	For you	\$\$	0.00					
F	For your spouse	\$	0.00					
ben not Unit disa pay doe	nsion or retirement income. Do not include an nefit under the Social Security Act. Also, except include any compensation, pension, pay, annuted States Government in connection with a disability, or death of a member of the uniformed so paid under chapter 61 of title 10, then include as not exceed the amount of retired pay to whice tired under any provision of title 10 other than of the second secon	as stated in the next sent uity, or allowance paid by t sability, combat-related inj services. If you received a that pay only to the exten- th you would otherwise be	ence, do he ury or ny retired that it	\$	0.00	D \$	0.00	
Do und cord crim com Gov dea	ome from all other sources not listed above not include any benefits received under the So der the Federal law relating to the national emerger the National Emergencies Act (50 U.S.C. 16 onavirus disease 2019 (COVID-19); payments ne, a crime against humanity, or international onpensation, pension, pay, annuity, or allowance vernment in connection with a disability, combatth of a member of the uniformed services. If ne parate page and put the total below.	icial Security Act; payment rgency declared by the Pr 601 et seq.) with respect to received as a victim of a varied at the varied by the United States at related injury or disability	ts made esident the war s y, or					
Jop	rai ato pago ana pat mo total polom			\$	0.0	o \$	0.00	
				\$	0.0		0.00	
	Total amounts from separate pages, if an	y.		\$	0.0		0.00	
	culate your total average monthly income. As the column. Then add the total for Column A to the column between the column betwe	he total for Column B.	\$1	2,227.82	- + \$	0.00		12,227.82 otal average onthly income
	py your total average monthly income from						\$	12,227.82
3. Cal	culate the marital adjustment. Check one:							<u> </u>
	You are not married. Fill in 0 below.							
	You are married and your spouse is filing with	າ you. Fill in 0 below.						
	You are married and your spouse is not filing	•						
	Fill in the amount of the income listed in line dependents, such as payment of the spouse's	11, Column B, that was No s tax liability or the spous	OT regula e's suppoi	rly paid for rt of somed	r the hous one other	sehold expense than vou or vo	es of you our depend	or your dents.
	Below, specify the basis for excluding this incadjustments on a separate page.	•					•	
	If this adjustment does not apply, enter 0 belo	DW.						
			_ \$					
			_					
	Total		\$	0	.00	Copy here=>		0.0
ł. Yc	our current monthly income. Subtract line 13	from line 12.					\$	12,227.82
5. C a	alculate your current monthly income for the	e year. Follow these step	s:					
		· · · · · · · · · · · · · · · · · · ·						

Robert W MacDowell

Debtor 1 Debtor 2	Robert W MacDowell Maureen E MacDowell	Case number (if known)	
	Multiply line 15a by 12 (the number of months in a year).		x 12
1:	5b. The result is your current monthly income for the year for this part of	f the form	\$146,733.84_

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

Debt		Maur	reen E MacDowell		Case number (if known)		
16	. Calc	ulate	the median family income that applies to y	'ou. Follow these	steps:		
			the state in which you live.	NY			
					_		
			the number of people in your household.	4			407 550 00
	16C.		the median family income for your state and a list of applicable median income amounts			\$	107,550.00
		instru	ctions for this form. This list may also be avai				
17	′. How 17a.	_	e lines compare?	on the ten of nego	1 of this form, shock box 1. Disposable in	oomo io n	at datarminad undar
	ıra.	_	Line 15b is less than or equal to line 16c. C 11 U.S.C. § 1325(b)(3). Go to Part 3. Do N				
	17b.		Line 15b is more than line 16c. On the top of 1325(b)(3). Go to Part 3 and fill out Calcu your current monthly income from line 14 a	lation of Your D			
Par	t 3:	Cal	culate Your Commitment Period Under 11	U.S.C. § 1325(b)	(4)		
18.	Сор	y your	total average monthly income from line 1	1.		\$	12,227.82
19.	cont	end th	e marital adjustment if it applies. If you are at calculating the commitment period under 1 acome, copy the amount from line 13.				
	•		marital adjustment does not apply, fill in 0 on	line 19a.		- \$	0.00
	19b.	Subtr	act line 19a from line 18.			\$_	12,227.82
20.	Calc	ulate	your current monthly income for the year.	Follow these ste	eps:		42 227 92
	20a.	Сору	line 19b			\$	12,227.82
		Multip	bly by 12 (the number of months in a year).				x 12
	20b.	The re	esult is your current monthly income for the y	ear for this part of	f the form	\$	146,733.84
	20c.	Сору	the median family income for your state and	size of household	f from line 16c	\$	107,550.00
	21.	How	do the lines compare?				
			Line 20b is less than line 20c. Unless otherwind is 3 years. Go to Part 4.	se ordered by the	court, on the top of page 1 of this form, ch	eck box 3	, The commitment
			Line 20b is more than or equal to line 20c. Un commitment period is 5 years. Go to Part 4.	less otherwise or	dered by the court, on the top of page 1 of	this form,	check box 4, The
Par	t 4:	Sig	n Below				
	By s	igning	here, under penalty of perjury I declare that t	he information on	this statement and in any attachments is t	rue and c	orrect.
)	(/s/	Robe	ert W MacDowell		X /s/ Maureen E MacDowell		
			W MacDowell of Debtor 1		Maureen E MacDowell Signature of Debtor 2		
	·		tember 16, 2020		Date September 16, 2020		
		MM	/DD / YYYY		MM / DD / YYYY		
	•		ked 17a, do NOT fill out or file Form 122C-2.				
	If vo	u chec	ked 17b. fill out Form 122C-2 and file it with t	his form. On line	39 of that form, copy your current monthly	income fro	om line 14 above.

Robert W MacDowell

Debtor 1

Fill i	n this info	ormation to iden	tify your	case:											
Debt	or 1	Robert W Ma	cDowel	I											
Debt (Spo	or 2 use, if filin	Maureen E M	acDow	ell											
Unite	ed States E	Bankruptcy Court	for the:	Eastern	District of	New York	(
	e number own)									☐ Ch	eck if th	nis is a	n amend	led fi	ling
	al Form 1	^{22C-2} 13 Calcul	latior	of Y	our D	ispos	sable I	ncc	ome						04/19
		form, you will ne Period (Official Fe			ed copy of	f Chaptei	r 13 Statem	ent of	f Your Cu	rrent Mon	thly Inco	ome an	d Calcula	ition	of
space	e is neede	e and accurate a ed, attach a sepa es, write your na	rate she	et to this	form, Inc	lude the l									
Part	1: Ca	Iculate Your Dec	ductions	from You	ur Income)									
th	e questio	I Revenue Servions in lines 6-15. may also be ava	To find t	he IRS st	tandards,	go online	e using the								
ех	penses if	expense amounts they are higher th d do not deduct a	an the st	andards. I	Do not incl	lude any	operating ex	pense	es that you	u subtracte	d from in	come i			
lf :	your expe	nses differ from m	onth to n	nonth, ent	ter the ave	rage expe	ense.								
No	ote: Line n	umbers 1-4 are n	ot used ii	n this form	n. These n	umbers a	pply to infor	matior	n required	by a simila	ar form u	sed in o	chapter 7	cases	3 .
5.	The nu	mber of people	used in (determini	ing your d	leduction	ns from inco	ome							
	plus the	ne number of people number of any a	additional	depende								•	4		
Na	ational Sta	andards	You mu	st use the	e IRS Natio	onal Stand	dards to ans	wer th	ne question	ns in lines (6-7.				
6.		clothing, and oth						d in lir	ne 5 and tl	ne IRS Nat	ional		\$		1,740.00
7.	the doll people	pocket health ca ar amount for out who are 65 or old than this IRS amo	-of-pocke derbeca	et health c use older	care. The note people ha	number of ave a high	people is sper IRS allow	plit into vance	o two cate	goriespeo	ople who	are un	der 65 an	nd	

Official Form 122C-2

Debtor 1 Debtor 2	Robert W MacDowell Maureen E MacDowell		Case number	(if known)	
Peopl	e who are under 65 years of age				
7	a. Out-of-pocket health care allowance per person	\$ 56			
7	b. Number of people who are under 65	x 4	_		
7	c. Subtotal. Multiply line 7a by line 7b.	\$ 224.00	Copy here	=> \$224.00	
Peopl	e who are 65 years of age or older				
7	d. Out-of-pocket health care allowance per person	\$ 125			
7	e. Number of people who are 65 or older	x 0	_		
7	f. Subtotal. Multiply line 7d by line 7e.	\$ 0.00	Copy here	=> \$0.00	
7	g. Total. Add line 7c and line 7f		\$224.00_	Copy total here=	> \$224.00
Local	Standards You must use the IRS Local Standards t	o answer the guest	ions in lines 8-15	J	
	I on information from the IRS, the U.S. Trustee Pro	•		ard for housing for	
	uptcy purposes into two parts:	9			
_	using and utilities - Insurance and operating expen	ises			
	using and utilities - Mortgage or rent expenses				
separ 8. F	swer the questions in lines 8-9, use the U.S. Truste ate instructions for this form. This chart may also be lousing and utilities - Insurance and operating exp	be available at the enses: Using the n	bankruptcy clerk's of member of people you	office.	specified in the
	n the dollar amount listed for your county for insurance lousing and utilities - Mortgage or rent expenses:	and operating expe	enses.	Ψ.	
	Using the number of people you entered in line 5, 1 listed for your county for mortgage or rent expense		unt	\$2,764.00	
9	b. Total average monthly payment for all mortgages a	and other debts sec	cured by your home.		
	To calculate the total average monthly payment, accontractually due to each secured creditor in the 60 for bankruptcy. Next divide by 60.	dd all amounts that	are		
			4.1		
	Name of the creditor	Average mo payment	onthly		
	Bethpage FCU	\$2,	666.19		
			0		5
	9b. Total average monthly paymen	nt \$ 2,	666.19 Copy here=>	-\$ 2,666.19	Repeat this amount on line 33a.
9	c. Net mortgage or rent expense.				
	Subtract line 9b (total average monthly payment) for rent expense). If this number is less than \$0, en		ge \$	97.81 Copy	> \$97.81_
	you claim that the U.S. Trustee Program's division fects the calculation of your monthly expenses, fil			g is incorrect and	\$
	Explain why:				

Debtor 1 Debtor 2				Case number (i	f known)		
11.	Local transportation expenses: Check the number of	vehicles for which ye	ou claim a	an ownershi	o or operating	expense.	
	□ 0. Go to line 14.						
	☐ 1. Go to line 12.						
	2 or more. Go to line 12.						
12.	Vehicle operation expense: Using the IRS Local Sta	dards and the number	er of vehic	cles for whic	h you claim th	ne	
	operating expenses, fill in the Operating Costs that ap		J				638.00
13.	Vehicle ownership or lease expense: Using the IRS You may not claim the expense if you do not make an more than two vehicles.						
Ve	hicle 1 Describe Vehicle 1: 2019 Honda Pilot	35000 miles					
13a.	. Ownership or leasing costs using IRS Local Standard.			\$	521.00		
	. Average monthly payment for all debts secured by Ve			—	321.00		
100.	Do not include costs for leased vehicles.	1000 11					
	To calculate the average monthly payment here and care contractually due to each secured creditor in the 6 bankruptcy. Then divide by 60.			t			
	Name of each creditor for Vehicle 1	Average mor payment	nthly				
	Citizens Auto Finance	\$ 7	89.00				
	Total Average Monthly Payn	ent \$ 7	89.00	Copy here =>	\$ 78 9	Repeat this amount on line 33b.	
]			
13c.	Net Vehicle 1 ownership or lease expense Subtract line 13b from line 13a. if this number is less t	an \$0, enter \$0		\$	0.00	Copy net Vehicle 1 expense here => \$ _	0.00
Ve	hicle 2 Describe Vehicle 2:					_	
13d.	. Ownership or leasing costs using IRS Local Standard			\$	0.00		
13e.	. Average monthly payment for all debts secured by Ve leased vehicles.	icle 2. Do not include	costs for				
	Name of each creditor for Vehicle 2	Average mor payment	nthly				
	-NONE-	\$					
	Total average monthly paym	ent \$	0.00	Copy here => -\$	0.0	Repeat this amount on line 33c.	
13f.	Net Vehicle 2 ownership or lease expense					Copy net	
	Subtract line 13e from line 13d. if this number is less t	an \$0, enter \$0		\$	0.00	Vehicle 2 expense here => \$ _	0.00
14.	Public transportation expense: If you claimed 0 ve Public Transportation expense allowance regardle					n the \$	0.00
15.	Additional public transportation expense: If you cla also deduct a public transportation expense, you may not claim more than the IRS Local Standard for <i>Public</i>	ill in what you believe					0.00

Robert W MacDowell

Debtor 1 Debtor 2 Robert W MacDowell Case number (if known)

Oth	er Nece	ssary Expenses	In addition to the expense the following IRS categor		ons listed above	, you are allowed your monthly expenses	s for	
16.	5. Taxes: The total monthly amount that you will actually pay for federal, state and local taxes, such as income taxes, self-employment taxes, social security taxes, and Medicare taxes. You may include the monthly amount withheld from your pay for these taxes. However, if you expect to receive a tax refund, you must divide the expected refund by 12 and subtract that number from the total monthly amount that is withheld to pay for taxes. Do not include real estate, sales, or use taxes.							3,420.35
17.	Involuntary deductions: The total monthly payroll deductions that your job requires, such as retirement contributions, union dues, and uniform costs.							
				r job, such	as voluntary 40	11(k) contributions or payroll savings.	\$	634.00
18.	. Life Insurance: The total monthly premiums that you pay for your own term life insurance. If two married people are filing together, include payments that you make for your spouse's term life insurance. Do not include premiums for life insurance on your dependents, for a non-filing spouse's life insurance, or for any form of life insurance other than term.							0.00
19.	admini	strative agency, such	The total monthly amount has spousal or child suppon n past due obligations for	ort payme	ents.	by the order of a court or You will list these obligations in line 35.	\$	0.00
20.			hly amount that you pay for					
		a condition for your jo				•		
	for y	your physically or me	entally challenged depend	lent child i	f no public educ	ation is available for similar services.	\$	0.00
21.			nly amount that you pay foor any elementary or seco			sitting, daycare, nursery, and preschool.	\$	0.00
22.	22. Additional health care expenses, excluding insurance costs: The monthly amount that you pay for health care that is required for the health and welfare of you or your dependents and that is not reimbursed by insurance or paid by a health savings account. Include only the amount that is more than the total entered in line 7.						¢	626.00
	,		nce or health savings acc			,	\$	020.00
23.	for you phone income Do not	and your dependen service, to the exten e, if it is not reimburse include payments for	ats, such as pagers, call wat necessary for your healt ed by your employer. or basic home telephone, i	aiting, call h and wel	er identification, fare or that of you	you pay for telecommunication services special long distance, or business cell our dependents or for the production of rvice. Do not include self-employment tount you previously deducted.	+\$	0.00
24.	•		allowed under the IRS ex		•	iouni you previously deducted.	\$	8,219.16
	Add lin	es 6 through 23.						
Add	litional I	Expense Deduction				ne Means Test. s listed in lines 6-24.		
25.	insurar					ises. The monthly expenses for health ly necessary for yourself, your spouse, c	or	
	Health	insurance		\$	451.44			
	Disabil	ity insurance		\$	0.00			
	Health	savings account		+ \$	200.00	٦		
	Total			\$_	651.44	Copy total here=>	\$	651.44
	Do you	actually spend this No. How much do y						
		Yes		\$				
26.	continu	ie to pay for the reas ousehold or member	sonable and necessary ca	re and sup who is un	oport of an elder able to pay for s	e actual monthly expenses that you will ly, chronically ill, or disabled member of such expenses. These expenses may (29A(b)	\$	0.00
27.						enses that you incur to maintain the		
	•	,	ily under the Family Violer p the nature of these expe			es Act or other federal laws that apply.	\$	0.00

Debtor 1 Debtor 2	Robert W MacDowell Maureen E MacDowell	Case number (if kno	wn)			
	Additional home energy costs. Your hom line 8.	e energy costs are included in your insurance and operati	ng expense	es on		
	If you believe that you have home energy of 8, then fill in the excess amount of home er	osts that are more than the home energy costs included in nergy costs	expenses	on line		
	You must give your case trustee document amount claimed is reasonable and necessa	ation of your actual expenses, and you must show that the ary.	additional		\$	0.00
	Education expenses for dependent child \$170.83* per child) that you pay for your depublic elementary or secondary school.	Iren who are younger than 18. The monthly expenses (rependent children who are younger than 18 years old to at	ot more tha tend a priva	in ite or		
	You must give your case trustee document claimed is reasonable and necessary and r	ation of your actual expenses, and you must explain why to already accounted for in lines 6-23.	he amount			
	* Subject to adjustment on 4/01/22, and ever	ery 3 years after that for cases begun on or after the date	of adjustme	nt.	\$	0.00
		he monthly amount by which your actual food and clothing allowances in the IRS National Standards. That amount on the IRS National Standards.				
		ional allowance, go online using the link specified in the so so be available at the bankruptcy clerk's office.	eparate			
	You must show that the additional amount	claimed is reasonable and necessary.			\$	0.00
	Continuing charitable contributions. The instruments to a religious or charitable organization.	e amount that you will continue to contribute in the form of inization. 11 U.S.C. § 548(d)(3) and (4).	cash or fina	ıncial		
	Do not include any amount more than 15%	of your gross monthly income.			\$	0.00
					Φ	651.44
	Add all of the additional expense deduct Add lines 25 through 31.	ions.			\$	031.44
Dedu	uctions for Debt Payment					
	or debts that are secured by an interest pans, and other secured debt, fill in lines	in property that you own, including home mortgages, 33a through 33e.	vehicle			
	o calculate the total average monthly paym reditor in the 60 months after you file for ba	ent, add all amounts that are contractually due to each se nkruptcy. Then divide by 60.	cured			
	Mortgages on your home				verage aymen	monthly t
33a.	Copy line 9b here			=> \$	-	2,666.19
	Loans on your first two vehicles					
33b.	Canadina 40h hana			=> \$		789.00
33c.	-			=> \$		0.00
				/ Ψ		0.00
33d.	List other secured debts:					
Nam	e of each creditor for other secured debt	, ,	Does paym include taxe or insurance	es		
			□ No			
	-NONE-		□ Yes	\$		
			□ No			
			☐ Yes	\$		
			□ No	,		
			☐ Yes	+ s		
				7		
33e	Total average monthly payment. Add lines	\$ 33a through 33d\$\$,455.19	Copy total here=>	\$	3,455.19

DTOT 1	Robert W MacDowell Maureen E MacDowell			Cas	e numb	oer (<i>if known</i>)			
	any debts that you listed in lin her property necessary for yo				,				
■ N	lo. Go to line 35.								
□ Y	es. State any amount that you listed in line 33, to keep po Next, divide by 60 and fill i	essession of your property							
Name of	the creditor	Identify property that se	cures the deb	t	Total	I cure amount		/lonthly	
-NONE	<u>-</u>			\$			÷ 60 = \$	mount	
							Co		
				Total	\$	0.00	Copy total here=	> \$_	0.00
	ou owe any priority claims - s past due as of the filing date o				at				
	lo. Go to line 36.								
ЦΥ	'es. Fill in the total amount of a ongoing priority claims, su			le current or					
	Total amount of all past-	•			\$	0.00	÷ 60	\$	0.00
36. Proje	ected monthly Chapter 13 plar				\$		-		
Office the E	ent multiplier for your district as e of the United States Courts (for executive Office for United State d a list of district multipliers that include the instructions for this form. This lise	or districts in Alabama and s Trustees (for all other d udes your district, go online u	Y North Caroli istricts). sing the link sp	na) or by ecified in the	x				
·		•	bankiupicy cit	erk 3 office.			Copy tot		
Avera	age monthly administrative expe	ense			\$.		here=>	\$ <u> </u>	
	d all of the deductions for deb l lines 33e through 36.	t payment.						\$	3,455.19
Total De	ductions from Income								
38. Add a	all of the allowed deductions.								
	by line 24, All of the expenses at ense allowances		. \$	8,219.16	_				
Сор	by line 32, All of the additional e.	xpense deductions	\$	651.44	_				
Сор	by line 37, All of the deductions	for debt payment	+\$	3,455.19					
	al da da gara		\$	12,325.79		Copy total here=>		\$	12,325.79

Debtor 1 Debtor 2		ert W MacI reen E Mac			Case	e nu	mber (<i>if known</i>)			
Part 2:	Det	ermine You	r Disposable Income Under 11 U.S.C. § 13	25(k	o)(2)					
			rent monthly income from line 14 of Form					\$		12,227.82
ch dis red	ildren. ability eived	The monthl payments for in accordance	ly necessary income you receive for support y average of any child support payments, for or a dependent child, reported in Part I of Formice with applicable nonbankruptcy law to the ended for such child.	ter o	care payments, or 22C-1, that you		\$0	.00		
em in '	ployer 11 U.S	withheld fro .C. § 541(b)	etirement deductions. The monthly total of a som wages as contributions for qualified retirent (7) plus all required repayments of loans from § 362(b)(19).	nent	plans, as specified		\$0	.00		
42. To	tal of a	all deductio	ns allowed under 11 U.S.C. § 707(b)(2)(A).	Cop	y line 38 here=>	>	\$ 12,325	.79		
exp the	oenses eir expe	and you ha enses. You r	al circumstances. If special circumstances judy and reasonable alternative, describe the spenust give your case trustee a detailed explanation cumentation for the expenses.	ecia	al circumstances and	b				
Descri	ibe the	special cir	cumstances		Amount of expe	nse	•			
					\$		_			
					\$					
					\$		_			
			Total	\$_	0.00		opy ere=> \$		0.00	
44. To	tal adj	ustments. /	Add lines 40 through 43.		=>	\$	12,325.79	Cop	e=> - \$ _	12,325.79
45. Ca Part 3:	1	•	thly disposable income under § 1325(b)(2) ome or Expenses	. Su	btract line 44 from li	ne	39.		\$	-97.97
ha tim you	ve cha e your u filed	nged or are case will be your petition	or expenses. If the income in Form 122C-1 or virtually certain to change after the date you to open, fill in the information below. For example, check 122C-1 in the first column, enter line in when the increase occurred, and fill in the a	iled ole, 2 in	your bankruptcy pe if the wages reporte the second column,	titic d ir	on and during the ncreased after			
Form		Line	Reason for change		Date of change		Increase or decrease?	An	nount of	change
☐ 1220 ☐ 1220 ☐ 1220 ☐ 1220 ☐ 1220 ☐ 1220	C-2 C-1 C-2 C-1 C-2 C-1						☐ Increase ☐ Decrease ☐ Increase ☐ Decrease ☐ Increase ☐ Increase ☐ Decrease ☐ Increase ☐ Increase	\$ \$ \$		
1 220	C-2				_	_	☐ Decrease	\$		

Debtor 1 Debtor 2	Robert W MacDowell Maureen E MacDowell	Case number (if known)
Part 4:	Sign Below	
		are that the information on this statement and in any attachments is true and correct.
X	/s/ Robert W MacDowell Robert W MacDowell Signature of Debtor 1	X /s/ Maureen E MacDowell Maureen E MacDowell Signature of Debtor 2
Date	September 16, 2020 MM / DD / YYYY	Date September 16, 2020 MM / DD / YYYY

Case number (if known)

Current Monthly Income Details for the Debtor

Debtor Income Details:

Income for the Period 03/01/2020 to 08/31/2020.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Three Village CSD

Income by Month:

6 Months Ago:	03/2020	\$10,867.24
5 Months Ago:	04/2020	\$10,867.24
4 Months Ago:	05/2020	\$10,867.24
3 Months Ago:	06/2020	\$38,035.22
2 Months Ago:	07/2020	\$0.00
Last Month:	08/2020	\$0.00
	Average per month:	\$11,772.82

Line 8 - Unemployment compensation (included in CMI)

Source of Income: NYS Unemployment

Income by Month:

6 Months Ago:	03/2020	\$364.00
5 Months Ago:	04/2020	\$728.00
4 Months Ago:	05/2020	\$910.00
3 Months Ago:	06/2020	\$728.00
2 Months Ago:	07/2020	\$0.00
Last Month:	08/2020	\$0.00
	Average per month:	\$455.00

Line 8 ssa - Unemployment compensation (Non-CMI)

Source of Income: Cares Act Unemployment

Income by Month:

6 Months Ago:	03/2020	\$0.00
5 Months Ago:	04/2020	\$2,400.00
4 Months Ago:	05/2020	\$3,000.00
3 Months Ago:	06/2020	\$2,400.00
2 Months Ago:	07/2020	\$2,400.00
Last Month:	08/2020	\$0.00
	Average per month:	\$1,700.00

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Eastern District of New York

In r	Robert W MacDowell Maureen E MacDowell		Case No.	
		Debtor(s)	Chapter	_13
	DISCLOSURE OF COMPEN	SATION OF ATTO	RNEY FOR DI	EBTOR(S)
1.	Pursuant to 11 U .S.C. § 329(a) and Fed. Bankr. P. 2016(b compensation paid to me within one year before the filing be rendered on behalf of the debtor(s) in contemplation of	of the petition in bankruptcy	, or agreed to be paid	to me, for services rendered or to
				6,250.00
	Prior to the filing of this statement I have received		\$	3,750.00
	Balance Due		\$	2,500.00
2.	\$310.00 of the filing fee has been paid.			
3.	The source of the compensation paid to me was:			
	■ Debtor □ Other (specify):			
4.	The source of compensation to be paid to me is:			
	■ Debtor □ Other (specify):			
5.	■ I have not agreed to share the above-disclosed competent of the share the sh	nsation with any other person	unless they are mem	bers and associates of my law firm.
	☐ I have agreed to share the above-disclosed compensation copy of the agreement, together with a list of the name			
5.	In return for the above-disclosed fee, I have agreed to rene	der legal service for all aspec	ts of the bankruptcy	case, including:
	 a. Analysis of the debtor's financial situation, and rendering b. Preparation and filing of any petition, schedules, stater c. Representation of the debtor at the meeting of creditors d. Representation of the debtor in adversary proceedings e. [Other provisions as needed] 	ment of affairs and plan which s and confirmation hearing, a	h may be required; nd any adjourned hea	
	Negotiations with secured creditors to recreaffirmation agreements and application 522(f)(2)(A) for avoidance of liens on housas needed.	s as needed; preparation	and filing of moti	ions pursuant to 11 USC
7.	By agreement with the debtor(s), the above-disclosed fee of Representation of the debtors in any disc any other adversary proceeding or appear	hargeability actions, jud		es, relief from stay actions or
		CERTIFICATION		
this	I certify that the foregoing is a complete statement of any bankruptcy proceeding.	agreement or arrangement for	r payment to me for r	epresentation of the debtor(s) in
;	September 16, 2020	/s/ Ronald D. We	iss	
i	Date	Ronald D. Weiss Signature of Attorna	-	
		Ronald D. Weiss	, P.C.	
		734 Walt Whitma Suite 203	ın Road	
		Melville, NY 1174		
			Fax: (631) 271-378	4
		weiss@ny-bankr Name of law firm	ирісу.сопі	

United States Bankruptcy Court Eastern District of New York

In re	Robert W MacDowell Maureen E MacDowell		Case No.	
		Debtor(s)	Chapter	13

VERIFICATION OF CREDITOR MATRIX

The above named debtor(s) or attorney for the debtor(s) hereby verify that the attached matrix (list of creditors) is true and correct to the best of their knowledge.

Date: September 16, 2020	/s/ Robert W MacDowell
	Robert W MacDowell
	Signature of Debtor
Date: September 16, 2020	/s/ Maureen E MacDowell
	Maureen E MacDowell
	Signature of Debtor
Date: September 16, 2020	/s/ Ronald D. Weiss
	Signature of Attorney
	Ronald D. Weiss 4419
	Ronald D. Weiss, P.C.
	734 Walt Whitman Road
	Suite 203
	Melville, NY 11747
	(631) 271-3737 Fax: (631) 271-3784

USBC-44 Rev. 9/17/98

Amex PO Box 981537 El Paso, TX 79998

Bethpage FCU 899 South Oyster Bay Road Bethpage, NY 11714

Capital One PO Box 30285 Salt Lake City, UT 84130-0285

CB/Pottery Barn 3075 Loyalty Circle PO Box 182789 Columbus, OH 43218

CB/SonyVisa 3075 Loyalty Circle PO Box 182789 Columbus, OH 43218

CB/Wayfair PO Box 182789 Columbus, OH 43218

Citicards CBNA 5800 South Corporate Plac Mail Code 234 Sioux Falls, SD 57108

Citizens Auto Finance 480 Jefferson Blvd. Warwick, RI 02886

Discover Bank PO Box 15316 Attn: CMS/Prod Develop Wilmington, DE 19850-5316

Ed Financial/ESA 120 N. Seven Oaks Drive Knoxville, TN 37922 Kohls - Capital One P.O. Box 3115 Milwaukee, WI 53201

Sears PO Box 6497 Sioux Falls, SD 57117-6497

Sofi Lending Corp 2750 East Cottonwood Pky Suite 300 Salt Lake City, UT 84121

Syncb / PPC PO Box 965005 Orlando, FL 32896

SYNCH / Care Credit PO Box 965036 Orlando, FL 32896-5036

Target / TD Bank 3701 Wayzata Blvd. Minneapolis, MN 55416

WF Bank, NA PO Box 14517 CBS MAC F8235-01C Des Moines, IA 50306

WF/Bobs Discont Furniture PO Box 14517 CBS MAC F8235-01C Des Moines, IA 50306

UNITED STATES BANKRUPTCY COURT EASTERN DISTRICT OF NEW YORK

STATEMENT PURSUANT TO LOCAL BANKRUPTCY RULE 1073-2(b)

DEBTOR(S):	Robert W MacDowell Maureen E MacDowell	CASE NO.:
		(b), the debtor (or any other petitioner) hereby makes the following disclosure nowledge, information and belief:
was pending at any t spouses or ex-spouse partnership and one have, or within 180	ime within eight years before thes; (iii) are affiliates, as defined or more of its general partners;	purposes of E.D.N.Y. LBR 1073-1 and E.D.N.Y. LBR 1073-2 if the earlier case ne filing of the new petition, and the debtors in such cases: (i) are the same; (ii) are in 11 U.S.C. § 101(2); (iv) are general partners in the same partnership; (v) are a (vi) are partnerships which share one or more common general partners; or (vii) ither of the Related Cases had, an interest in property that was or is included in the]
NO RELATED (CASE IS PENDING OR HAS E	BEEN PENDING AT ANY TIME.
☐ THE FOLLOWI	NG RELATED CASE(S) IS PE	ENDING OR HAS BEEN PENDING:
1. CASE NO.:	JUDGE: DISTRICT	//DIVISION:
		[If closed] Date of closing:
CURRENT STATU	JS OF RELATED CASE:	(Discharged/awaiting discharge, confirmed, dismissed, etc.)
		(Discharged/awaiting discharge, confirmed, dismissed, etc.)
		Refer to NOTE above):
	LISTED IN DEBTOR'S SCHE F RELATED CASE:	DULE "A" ("REAL PROPERTY") WHICH WAS ALSO LISTED IN
2. CASE NO.:	JUDGE: DISTRICT	7/DIVISION:
CASE STILL PEND	DING (Y/N):	[If closed] Date of closing:
CURRENT STATU	JS OF RELATED CASE:	
		(Discharged/awaiting discharge, confirmed, dismissed, etc.)
MANNER IN WHI	CH CASES ARE RELATED (1	Refer to NOTE above):
	LISTED IN DEBTOR'S SCHE F RELATED CASE:	DULE "A" ("REAL PROPERTY") WHICH WAS ALSO LISTED IN
3. CASE NO.:	JUDGE: DISTRICT	"/DIVISION:
CASE STILL PEND	DING (Y/N):	[If closed] Date of closing:

DISCLOSURE OF RELATED CASES (cont'd)	
CURRENT STATUS OF RELATED CASE:	
(D	ischarged/awaiting discharge, confirmed, dismissed, etc.)
MANNER IN WHICH CASES ARE RELATED (Refer to	NOTE above):
REAL PROPERTY LISTED IN DEBTOR'S SCHEDULE 'SCHEDULE "A" OF RELATED CASE:	"A" ("REAL PROPERTY") WHICH WAS ALSO LISTED IN
<i>NOTE:</i> Pursuant to 11 U.S.C. § 109(g), certain individuals be eligible to be debtors. Such an individual will be require	who have had prior cases dismissed within the preceding 180 days may not ed to file a statement in support of his/her eligibility to file.
TO BE COMPLETED BY DEBTOR/PETITIONER'S ATT	ORNEY, AS APPLICABLE:
I am admitted to practice in the Eastern District of New Yor	rk (Y/N): Y
CERTIFICATION (to be signed by pro se debtor/petitioner	or debtor/petitioner's attorney, as applicable):
I certify under penalty of perjury that the within bankruptcy as indicated elsewhere on this form.	case is not related to any case now pending or pending at any time, except
/s/ Ronald D. Weiss	
Ronald D. Weiss 4419 Signature of Debtor's Attorney Ronald D. Weiss, P.C. 734 Walt Whitman Road	Signature of Pro Se Debtor/Petitioner
Suite 203 Melville, NY 11747 (631) 271-3737 Fax:(631) 271-3784	Signature of Pro Se Joint Debtor/Petitioner
	Mailing Address of Debtor/Petitioner
	City, State, Zip Code
	Area Code and Telephone Number

Failure to fully and truthfully provide all information required by the E.D.N.Y. LBR 1073-2 Statement may subject the debtor or any other petitioner and their attorney to appropriate sanctions, including without limitation conversion, the appointment of a trustee or the dismissal of the case with prejudice.

<u>NOTE</u>: Any change in address must be reported to the Court immediately IN WRITING. Dismissal of your petition may otherwise result.

USBC-17 Rev.8/11/2009